



THE SEVENTY-FIRST  
**ANNUAL REPORT**  
UPON THE  
**HEALTH OF LEICESTER,**  
**For the Year 1919,**

BY

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INCLUDING

REPORT of the TUBERCULOSIS OFFICER.

REPORT on the CITY HOSPITAL and SANATORIUM.

REPORT of the PUBLIC ANALYST.

REPORT of the CHIEF INSPECTOR.

REPORT of the FOOD INSPECTOR.

AND

REPORTS OF THE REFUSE DISPOSAL AND  
STREET CLEANSING DEPARTMENTS.

LEICESTER:

THE BLACKFRIARS PRESS, LTD., 17-23 ALBION STREET.

# SUMMARY OF STATISTICS

## FOR THE YEAR 1919.

### BOROUGH OF LEICESTER.

Population (estimated) at Mid-year 1919	...	...	236,059
Ditto for Birth-rate	...	...	245,903
Population at Census, 1911, 227,242.			
Marriages	...	...	2,518
Marriage-rate	...	...	21.33
Births	...	...	3,774
Birth-rate	...	...	15.34
Deaths (corrected for transferable deaths)	...	...	3,083
Death-rate	...	...	13.06
Infant Mortality (per 1,000 Births)	...	...	98.0
Zymotic-rate	...	...	.29
Diarrhoea-rate	...	...	.09
Respiratory-rate	...	...	2.10
Cancer-rate	...	...	1.05
Tuberculosis-rate	...	...	1.38
Phthisis-rate	...	...	1.11
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Area of Borough (in acres)	...	...	8,582
Number of persons per acre at Census, 1911	...	...	26.4
Number of persons per Tenement at Census, 1911	...	...	4.41
Number of Inhabited Tenements, Census, 1911	...	...	51,481
" " " " July, 1919	...	...	54,306
Number of Empty Houses, July, 1919	...	...	68
Rateable value (November 1st, 1919)	...	...	£1,171,967
Rates in the £:	1918-19	1919-20	
	s. d.	s. d.	
Poor Rate	1 10	1 10	
General District Rate	7 9	10 0	
(The Rates for 1920-21 are considerably higher.)			

### 96 GREAT TOWNS.

(Population exceeding 50,000)  
(For Comparison.)

Birth-rate	...	...	...	...	19.0
Death-rate	...	...	...	...	13.8
Infant Mortality	...	...	...	...	93

# CONTENTS.

## Part I. Statistical.

	PAGE.
Population	1
Physical Features of District	2
Marriages	4
Births and Birth rate	4
Illegitimate Births	5
Still births	5
Deaths and Death rate	5
Infant Mortality	5
Illegitimate Deaths	7
Ward Statistics	8
Sanitary Circumstances of District	10
Food	11

## Part II.—Zymotic Diseases.

Influenza	13
Smallpox and Vaccination	13
Scarlet Fever	14
Diphtheria	15
Enteric Fever	15
Diarrhœa and Enteritis	16
Measles	16
Whooping Cough	17
Puerperal Fever	17
Cerebro-spinal Fever	17
Polio-myelitis	18
Encephalitis Lethargica	18
Venereal Disease	19
Tuberculosis	26
Goitre	28

## Part III.—General.

Factory and Workshops Act	31
Housing	32
Shortage of Houses	32
Maternity and Child Welfare	34
Health Society	36
Municipal Infants' Milk Depot	37
Newton Ward Centre	38
Day Nurseries' Society	38
Municipal Maternity Home	39
Milk (Mothers' and Children's) Order, 1918	42
Supervision of Midwives	43
Ophthalmia Neonatorum	43
Scabies	43
Alcohol and Public Health	44
Cremation	45

## APPENDICES.

I.—REPORT ON THE TUBERCULOSIS DISPENSARY	47
II.—REPORT ON THE ISOLATION HOSPITAL AND SANATORIUM	53
III.—REPORT OF THE PUBLIC ANALYST	65
IV.—REPORT OF THE CHIEF INSPECTOR	69
V.—REPORT OF THE FOOD INSPECTORS	71
VI.—REPORT OF THE REFUSE DISPOSAL DEPARTMENT	73
VII.—REPORT OF THE STREET CLEANSING DEPARTMENT	75
VIII.—STATISTICAL TABLES	77

TOWN HALL, LEICESTER.

May, 1920.

**To the Chairman and Members of the Sanitary Committee.**

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GENTLEMEN,

I have the honour to present to you my Annual Report on the Health of Leicester for the year 1919. Although this was the first year following the cessation of the war, when conditions of life were still very abnormal, the health of the city, I am glad to say, was on the whole very favourable.

In compliance with the wishes of the Ministry of Health the arrangement of the Report has been somewhat modified, the object being to get all Annual Reports for different towns to adopt, as far as possible, a similar arrangement, in order to facilitate comparison.

The most important occurrence during the year from the health point of view, was the recrudescence during the spring of the great influenza epidemic of 1918. This resulted in 330 further deaths from this terrible disease. Full details of the outbreak were included in the last Report. Had it not been for these influenza deaths the death-rate for 1919 would have been the lowest on record. As it was, the rate was only a fraction over 13 per thousand as compared with nearly 18 in the previous year.

During 1919 a marked increase took place in the number of both the marriages and births. This, of course, was only to be expected as a result of the return home of the men from the war. The increase in the birth-rate is being continued during 1920 and the number of births is now greatly in excess of the deaths.

The rate of infant mortality continues to fall, and for the first time on record it was below 100 per 1,000 children born.

Part 2 of the Report deals with infectious diseases and with the measures taken to deal with them. Diphtheria was rather more prevalent than usual, and a localised outbreak of typhoid

fever was traced to infection spread by milk. There was only one death from measles. Venereal disease is reported upon at some length as its importance calls for. Facilities for treatment have been increased, and a fresh clinic has been opened for young unmarried women and girls at St. Mary's Home. In connection with the campaign for preventing these diseases which is being carried on in co-operation with the Sanitary Committee by the Leicester Branch of the N.C.C.V.D., importance is attached to the systematic instruction in sex hygiene of adolescents, and efforts are being made, with some success, to reach young people through the medium of the evening continuation classes and Secondary schools.

As regards tuberculosis, it is satisfactory to be able to record a decrease in the number of both fresh cases and deaths.

There is some reason to think that the affection known as goitre, or enlargement of the thyroid gland, has become more frequent than in pre-war days. It would appear from inquiries made that some other towns have had a similar experience.

In Part 3 the all-important question of the acute housing shortage in Leicester is referred to, and the great desirability is urged of providing ample garden ground in connection with all new houses.

The past year has been a busy one in connection with Maternity and Child Welfare work, and several new developments are recorded, including the provision of a municipal maternity home.

Under the provisions of the Milk (Mothers' and Children's) Order, 1918, the practice of supplying milk at less than cost price to necessitous cases has been continued and extended.

The City Isolation Hospital and Sanatorium has continued its useful work. Being no longer required for the treatment of wounded soldiers, all the wards are again available for the treatment of civilian cases. A new departure is the admission of sick and wasting infants needing institutional treatment. One small block is set aside for this purpose.

In conclusion, I wish to thank the members of the Sanitary Committee for the unfailing courtesy and consideration they have extended to me, and I beg to offer my congratulations to the veteran Chairman, Ald. Windley, J.P., for having added one more year, and a very important one from the point of view of sanitary developments, to the long term during which he has occupied the position.

I am, gentlemen,

Your obedient servant,

C. KILLICK MILLARD,  
Medical Officer of Health.

# Medical Officer of Health's Report

FOR THE YEAR 1919.

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## PART I.

### Statistical and General Review of District.

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#### NATURAL AND SOCIAL CONDITIONS.

##### Population.

During the early part of the year 1919 the great majority of the men serving in the forces were still absent, but they gradually returned as demobilisation proceeded.

The Registrar General has decided to adopt as his estimate of the population for the year 1919 the following figures, viz.:

For calculating the death-rate	...	236,059
For calculating the birth-rate	...	245,903

Judging by the number of sugar cards issued in 1919, viz., 240,000, the latter figures would appear to be fairly correct, but from the number of inhabited tenements, it is possible that it is considerably below the truth. In July, 1919, the Overseers returned the number of inhabited tenements as 54,306, and taking the number of inhabitants per tenement as being the same as was found to exist at the last census (1911), viz., 4.41, the population would be 239,489. But it is well known that owing to the great housing shortage, much crowding in houses exists, often more than one family sharing a house, so that it is fairly safe to assume that the number of persons per tenement is considerably in excess of what was the case in 1911. Probably, therefore, the real population of the city, now that all the men have returned from the war, is greater than the figure estimated by the Registrar General, and may well be even above 250,000.



In the meantime, however, it is proposed for the purpose of this report to accept the Registrar General's estimate.

## **PHYSICAL FEATURES AND GENERAL CHARACTER OF DISTRICT.**

The City of Leicester lies in the valley of the Soar—a tributary of the Trent—occupying both banks of the river. Most of the city, including all the older part, is low-lying, but the newer residential districts of Stoneysgate, Spinney Hill, North Evington and West Humberstone are on higher ground. The subsoil is clay, with patches of sand and gravel in places.

### **Industries.**

The staple industries are hosiery and boots and shoes, but there are many other trades, e.g., engineering, tailoring, cardboard box making, elastic web manufacture, printing, wholesale druggists, cigar making, coach-building, etc. There are also numerous individual businesses, e.g., manufacture of safety-razors, cane furniture, electrical apparatus, sweetmeats, skin dressing, in addition to numerous other businesses found in every large centre of population. Leicester is fortunate, therefore, in not being a single-industry town, and, moreover, as her staple trades are concerned with the necessities of life, she is less likely to be affected adversely by fluctuations in fashion than might otherwise be the case. All through the war, and since the war, trade in Leicester has been extremely good, and there has been very little unemployment.

The boot and shoe trade is a bad trade as regards tuberculosis (the real explanation of this not being very clear), but otherwise the industries of Leicester are not, speaking generally, unhealthy.

One feature of Leicester industries calling for comment is the exceptional number of women, both married and single, "engaged in occupations." At the last census, out of a total female population of 98,584, no less than 46,769 were so employed. The explanation of this lies in the fact that so many women are employed in the manufacture of hosiery, boots and shoes, and cardboard boxes. Such is the demand for labour



that numbers of women come in daily from the surrounding villages, whilst the number of women who take up domestic service is almost negligible.

### **Poor Law Relief.**

At one time the amount spent on Poor Law Relief was above the average, this, however, being due rather to the liberal policy of the Board of Guardians than to an exceptional amount of poverty. Since the outbreak of war the number of persons assisted has fallen very considerably.

### **Hospital Accommodation.**

There is an excellent general hospital, the Leicester and Leicestershire Royal Infirmary, providing some 300 beds, including a Children's Block of 70 beds.

The working-classes, through the Leicester and Leicestershire Hospital Saturday Fund—which makes weekly collections in most of the chief factories—contribute many thousands of pounds per annum towards the upkeep of the Royal infirmary. They also, through the same fund, maintain their own convalescent homes.

There is a much smaller semi-private hospital, the Faine Hospital, where for a reasonable payment persons rather above the working-class can obtain treatment and have operations performed.

There are now two Maternity Hospitals in the city. One, in Causeway Lane, which is supported by voluntary contributions supplemented by payments for admission, provides 20 beds, and has been in existence for 15 years. The other has just been opened, at the end of 1919, by the Corporation.

The Guardians have an excellent modern Poor Law Infirmary at North Evington, providing 550 beds, including a detached Lying-in Block.

### **Amenities.**

Leicester is well provided with the amenities of an up-to-date modern city in the way of public parks, baths, free

libraries, etc., and has an excellent tram service. The amount of ground utilised for allotment gardens is much above the average.

Leicester possesses an exceptionally fine and convenient public hall—the De Montfort Hall—the property of the Corporation. It has a seating capacity of 3,500, and contains a very fine organ.

Educationally, Leicester has good reason to be proud. She possesses many excellent modern elementary schools; her secondary schools are so popular that they are altogether too small, and new and more commodious buildings are about to be erected; and there is an excellent modern School of Art and Technical School. To crown the whole educational system, a scheme has now been launched for providing a University College to be an integral part of a new provincial University. A magnificent site has been presented and a substantial sum of money has already been promised.

### **VITAL STATISTICS FOR 1919.**

#### **Marriages.**

The number of marriages registered in the city during the year 1919 was 2,518, equivalent to a marriage-rate of 21.33 per 1,000. This was a considerable advance upon the previous year, when the number was 2,030. It was only to be expected, of course, that the termination of the war, and the return home of the men after demobilisation, would lead to an increase of the marriage-rate, in spite of the large number of marriages which took place during the war. Moreover, the great industrial activity prevailing in Leicester and the high wages which young people can now earn have probably conduced to the same result.

#### **Births.**

During the war the number of births in Leicester, as in other places, was greatly reduced, falling from 5,144 in 1914, to 4,851, 4,684, 3,688, and 3,246 in the following years. This reduction was partly due, no doubt, to the spread of birth control principles, which is believed to have been largely res-

possible for the fall in the birth-rate during the past 10 years; but it was also due, no doubt, to the absence of so many potential fathers from the country whilst serving with the forces. With the cessation of the war and the return home of the men the birth-rate has markedly increased; during 1919 the births increased to 3,774 (males 1,960, females 1,814); and during the present year, 1920, a further increase is taking place.

The birth rate in 1919 was 17.34.

### **Illegitimate Births.**

These numbered 242, equivalent to 6.3 per cent. on the total births. The number indicates a slight increase on the figures for the two previous years.

### **Still-Births.**

105 of these were notified, 43 by medical men, and 62 by midwives. Under our revised conditions for infant welfare work, it is intended that as far as possible all still-births shall be investigated.

### **Deaths.**

The number of deaths registered was (after correction) 3,083. This is substantially less than in the previous year, but in that year the deaths were exceptionally high owing to the fatal epidemic of influenza. In 1919 there were still 330 deaths due to influenza, but in spite of this the death-rate was very favourable, viz., 13.06. Had there been no deaths from influenza, the death-rate would have fallen below 12 per 1,000.

## **INFANT MORTALITY.**

The number of deaths of infants below one year of age was: Males 218, females 152, total 370. This is equal to a rate of 98.0 per 1,000 births, which is the lowest figure hitherto attained. For the first time on record our infant mortality rate has fallen below 100. This is of course very gratifying, especially when we know that it is not a fortuitous occurrence. The infant mortality rate has been gradually falling for a number of years, subject to inevitable fluctuations depending upon the character of the summer, whether hot and dry or

cold and wet. Twenty years ago, in 1899, the infant mortality was 196 (exactly double what it was last year). Ten years ago, in 1909, it had been reduced to 126, and in 1919, as already stated, it was only 98.

The infant mortality rate varied considerably, as is always the case, in different districts of the city.

Whilst we are justified in attributing the very satisfactory reduction which has taken place as being in part, at least, due to the great efforts which have been and are being made in connection with maternity and child welfare, there are probably other and far-reaching factors at work tending to benefit child-life.

In this connection it is highly interesting to consider the effect that the Great War has had upon infant mortality. *A priori* we might have confidently predicted that war, especially such a war as we have just emerged from—attended as it was by such far-reaching effects upon conditions of life generally—would inevitably have increased infant mortality. As a matter of fact, however, infant mortality, not only in Leicester, but throughout the country, has been actually lower during the war than in pre-war years. Moreover, a similar result has also been experienced both in France and Germany. It is true that in all three countries special efforts were put forth to assist and protect child-life, but these efforts were by no means universal, and although no doubt they ameliorated the conditions of life for infants, they cannot have entirely neutralised such bad effects as scarcity of food and of almost all other necessities of life. Therefore, although no doubt they tended to mitigate the effects of the war, these efforts scarcely seem an adequate explanation of the fact that infant mortality actually fell below the pre-war level. What the real explanation is, is not very clear.

There is another aspect of the case which is worth referring to, though it only makes the actual result seem more remarkable and difficult to explain. The birth-rate, as we know, fell greatly during the war. Part of this decline may no doubt be attributed to volitional restriction, which has been the cause of the fall in the birth-rate in pre-war years. But much of

the exceptional decline which occurred during the war was due, without doubt, to the absence from the country of so many potential fathers. Such children as were born, therefore, were to a large extent begotten by the men left behind. But the men left behind were certainly inferior from the point of view of physical health to the men sent to the front. We should certainly have anticipated, then, that the children begotten by them would have been below the average in vitality, and that this fact alone would have led to a higher infant mortality. That infant mortality has fallen instead of risen is, therefore, all the more satisfactory, even though we are unable to explain it.

### **Deaths of Illegitimate Infants. The problem of the "unwanted child."**

These numbered 53, and as there were 242 illegitimate children born, the mortality was at the rate of 219 per 1,000, as compared with only 98 for all infants born. In other words, the mortality amongst illegitimate infants was more than twice as great as amongst legitimate. It is unnecessary to comment here upon this sad contrast. One would like to see something more done for the unmarried mother and her child. The Leicestershire County Council have made a step in this direction by opening a hostel for unmarried mothers, where they can lodge without being separated from their infants. We shall watch the experiment with great interest. It is undoubtedly the case that unmarried women with babies often find the very greatest difficulty in finding lodgings. Very frequently they are obliged to be separated from their infants merely for this reason.

An inquiry is now being carried out into the question of illegitimacy in Leicester, and when sufficient data have been collected, a special report will be presented.

The Bastardy Bill now before Parliament contains some new and drastic provisions, intended to ameliorate the lot of the illegitimate child. Personally, I sincerely hope it will be passed into Law.

## WARD STATISTICS.

The City of Leicester is divided into 16 Municipal Wards, which vary greatly in their size, position, density of population, and general character, and also as to the social position of the inhabitants. Speaking generally, if the various wards be arranged into three groups, viz. :—(1) Those near the centre and in the oldest part of the city; (2) those further from the centre; and (3) those on the outskirts or suburbs, it will be found that the last mentioned (3) have the lowest death-rate, whilst (1) have the highest. Infant mortality and the birth-rate, though with one or two exceptions, follow the same order.

### Death-rates.

For once, Knighton Ward, which usually has the distinction of having the lowest death-rate, has to yield first place to Westcotes with 9.5, Knighton coming a very close second with 9.8. Then comes the Abbey with 11.0; Aylestone, 11.7; and West Humberstone, 11.8. At the other end of the scale we find Wygggeston, 17.0; De Montfort, 16.1; and Newton, 15.5. Whilst it is satisfactory to see Newton Ward, which for many years almost invariably had the highest death-rate, gradually improving its position, it may seem surprising to find De Montfort so low down. It is probably due to the fact that this ward is rather an old-fashioned residential neighbourhood where elderly people predominate.

### Birth-rates.

The lowest rate was in De Montfort Ward, as usual, 8.2. The reason is to be found no doubt in the character of the neighbourhood as mentioned above. Very few young people settle in De Montfort Ward, and a good many people keep domestic servants. Next lowest to De Montfort comes Knighton with a birth-rate of 10.9, and then Westcotes, 11.0. At the other end of the scale we find the highest birth-rates in Wygggeston Ward, 24.4; Newton Ward, 21.3; The Castle and also Wycliffe, 19.7.

### Infant Mortality.

Undoubtedly there is a close relationship between the birth-rate and infant mortality, for as a rule the higher the birth-

rate the higher do we find the rate of infant mortality, and vice-versa. During 1919 the lowest infant mortality rates were in Knighton, 52, Westcotes, 57, Wycliffe, 59, and De Montfort, 65; whilst the highest rates were in St. Margaret's, 117, Wygggeston, 113, and Aylestone, 111. Aylestone ought not to have such a high figure. The birth-rate is not very high. It is an outlying district where the rate should be low. Hitherto there has been no infant welfare centre in Aylestone, and in the light of the high infant mortality last year efforts should be made to establish one.

On the other hand, Newton Ward, in which the Newton Ward Infant Consultation Centre Committee have concentrated their efforts, and which at one time used to have, almost invariably, one of the highest infant death-rates, comes out comparatively well with a rate of only 92, being below the average for the whole city. This is quite the best figure hitherto recorded in this ward, and the Committee, together with their official Health Visitor—Nurse Masters—are to be congratulated. The average for the five previous years was 170, or nearly double.

### **Phthisis-rates.**

The lowest rates were in Knighton, 0.4, Aylestone and Westcotes, each 0.7; and Charnwood, The Castle, and Spinney Hill, each 0.9.

On the other hand, we find the highest rates for phthisis in Wycliffe, 1.7; St. Margaret's, and De Montfort, 1.6; Newton, 1.5; Wygggeston and West Humberstone, 1.4.

### **Average Rates.**

For purposes of comparison it is of course much fairer to take the average of several years, rather than the figures for a single year, and in Tables 2 and 3, the average figures for five years will be found. The worst wards for phthisis will there be seen to be Wygggeston, Newton, and St. Margaret's, the oldest, poorest, and most central districts in the city; whilst the best wards are Knighton, De Montfort, Aylestone, and West Humberstone.



Undoubtedly the ideal to aim at is to pull down old and congested cottage property in the centre of the city to make room for factories, and house the displaced population in the outlying suburbs in new houses, built comparatively few to the acre. To a large extent, this is what has been taking place in past years, but at the present time no question of demolishing even the very oldest and worst cottages can be entertained.

## **SANITARY CIRCUMSTANCES OF THE DISTRICT.**

### **Water Supply.**

Leicester is now amply supplied with an abundance of pure water. This is obtained from reservoirs on the Charnwood Forest, a few miles from the city, and in recent years this source of supply has been supplemented by the water obtained from the Derwent Valley in North Derbyshire, under the great Derwent Valley Water Scheme. This latter is now the principal source of supply. It is a very pure and soft upland surface water, so soft, indeed, that it is apt to attack hot water pipes. A scheme is now being carried out for adding a certain quantity of lime to the water with subsequent filtration, in order to remedy this trouble.

Practically all shallow wells in the neighbourhood of dwellings have been abolished.

### **Drainage and Sewerage.**

The sewage of Leicester flows to Belgrave, the lowest part of the city, where it is pumped up to the Beaumont Leys Sewage Farm. Within recent years bacteria beds have been installed, and the sewage is now subjected to bacterial treatment before it is turned on to the land for final purification.

### **Closet Accommodation.**

Water carriage is now universal throughout the city, the pail closet system, which at one time existed, having been abolished in favour of water closets.

### **Scavenging.**

Practically all houses are now supplied with moveable galvanised ashbins, and the contents are collected weekly and

taken to the Refuse Destructors, of which there are three, to be burnt. (See report of work done in Appendix 6.)

### **Sanitary Inspection of District.**

(See Report of Chief Inspector, Appendix 4.)

### **Offensive Trades.**

There are very few of these in Leicester. Such as there are have been visited from time to time and kept under observation.

## **FOOD.**

### **Milk Supply.**

The greater part of the milk supply of the city comes from farms in the surrounding country districts. The cowsheds and dairies within the city have been visited by the food inspector from time to time.

### **Milk and Cream Regulations.**

These are being generally observed. No case of added preservatives in milk was discovered out of 78 samples of milk tested.

### **Milk (Mothers and Children's) Order, 1918.**

(See Maternity and Child Welfare, Part III.)

### **Inspection of Food.**

Two special Food Inspectors are employed, Mr. Martin Tyldesley and Capt. F. Sewerbutts. Their reports will be found in Appendix 5.

### **Slaughter Houses.**

Leicester possesses a municipal Abattoir, adjoining the Cattle Market in Aylestone Road. Nearly all the constituent slaughter houses in the Abattoir are let to private butchers. There are also 59 registered slaughter houses situated in various parts of the city. Many of the latter are inevitably a great nuisance, placed as they are in thickly populated neighbourhoods. From time to time, as the opportunity occurred, the Sanitary Committee have come to an arrangement with

individual owners to surrender the right to slaughter. Within the last ten years the number has been reduced by 13. It is very desirable that all of these private slaughter houses should be got rid of as soon as possible.

**Tubercular Carcases.**

During the year the number of carcases found to be affected with Tuberculosis sufficient to necessitate the destruction of the whole or part of the carcase was 139.

**SALE OF FOOD AND DRUGS ACT.**

The report of the Public Analyst will be found in Appendix 3.

## PART II.

### Prevalence and Control of Infectious Diseases.

The chief events of the year 1919 under this heading were the epidemic of influenza in the spring (part of the great pandemic of 1918-19), an unusual prevalence of diphtheria, and a localised epidemic of enteric fever spread by milk.

#### **Influenza.**

The epidemic wave of February and March caused some 300 deaths, together with some 200 further deaths from pneumonia and bronchitis. During the more fatal wave of October and November, 1918, the corresponding number of deaths was:—Influenza, 800; pneumonia and bronchitis, 200. Full details of this outbreak were given in the last report. We need only mention here that the Groby Road Hospital again proved invaluable for treating many of the more severe cases.

#### **Smallpox and Vaccination.**

No case of smallpox occurred in Leicester during the year. With the exception of a solitary case (imported) which occurred in 1913, there has been no known cases in the city for 14 years. As regards vaccination, the figures for 1919 were:—Public vaccinations, 81; private, 73; total, 154; exemptions granted, 2,954. The total number of births registered during the year was 3,774, so that the vaccinations registered amounted to 4.0 per cent. of the children born. During the past 35 years the vaccinations registered have been about 10 per cent. of the births.

According to orthodox teaching, the situation in Leicester or in any other town in which infantile vaccination has been so greatly "neglected," is one fraught with great danger. There is some reason to think, however, that orthodoxy on this question is not quite so rigid as was formerly the case. The remarkable "object-lesson" which Leicester has afforded must,

one is justified in believing, have had some effect. Moreover, the fact cannot be gainsaid that smallpox is far less prevalent than it used to be in spite of the increasing neglect of infantile vaccination throughout the country. It seems possible, therefore, if the amount of infantile vaccination continues to decline, and if smallpox continues to give as little trouble as it has done during the past 15 years, that the belief in the great necessity for infantile vaccination may come to be modified.

At the same time, to prevent misunderstanding, let it be clearly understood that the great value of *recent* vaccination in protecting the individual when exposed to any real danger of infection from small pox, remains as firmly established as ever. It is just because we have this invaluable ally to fall back upon, should the need for it arise, that we can view the future with comparative equanimity.

The immunity of our soldiers from smallpox during the great war has sometimes been claimed as a great triumph for vaccination. It is necessary to remember, however, that the vaccination of our soldiers was *recent* vaccination. Vaccination performed in infancy, if this alone had been trusted to, would have been of very doubtful value, for whilst only partially protecting from attack, it would have tended to "mask" the disease, and thereby have actually tended to encourage its spread.

### **Scarlet Fever.**

Cases, 579; Deaths, 2; Case Mortality, 0.34.

Cases removed to Hospital, 417.

It is seven years now since Scarlet Fever caused much trouble in Leicester. The disease has become extremely mild, and out of the 579 cases reported only two proved fatal. It is doubtful whether it is really worth while, as a matter of national policy, to spend so much money upon the isolation of this disease in hospital. The measure has comparatively little effect upon the prevalence of the disease, and on occasions when it has been necessary to suspend or curtail admissions (as has happened more than once in Leicester), no increase in prevalence appears to result. In the meanwhile, however, the public have come to expect removal to hospital, and un-

doubtedly it is a very great convenience. This is specially true in Leicester, where so many women go out to work or take in work at home. The existence of a case of scarlet fever in a house necessarily interferes with this, and thereby causes financial loss to the individual. Moreover, now that the housing shortage has become so acute and so many homes are unduly crowded, the need for hospital treatment is greater than usual.

### **Diphtheria.**

Cases, 272; Deaths, 30; Case Mortality, 11.0 per cent.

Cases removed to hospital, 269.

This disease was more prevalent than has been the case for many years. The etiology of diphtheria remains very obscure. A majority of the cases were children, as is usually the case, but there was very little evidence to connect infection with particular schools. As a rule, not more than one case occurred in a household, and there appeared to be no special incidence upon houses found to have drain defects. Indeed, many of the houses attacked were above the average structurally. There was no reason to suspect any particular milk supply.

**DIPHTHERIA ANTITOXIN.**—A supply of this is kept at the Health Department, Town Hall, and is supplied free to medical practitioners for use within the city. During the year the quantity of serum thus supplied amounted to 46 doses of 4,000 units each.

### **Typhoid or Enteric Fever. Outbreak due to Milk.**

Cases, 30; Deaths, 3; Case Mortality, 10 per cent.

Cases removed to Hospital, 17.

The number of cases was above the average for recent years, and this is accounted for by the occurrence of an unfortunate outbreak in the last quarter of the year, numbering 20 cases, which were all traced to the milk supply. Every one of the cases, which all occurred within the space of a few weeks, had their milk supply from the same dairy. It was then discovered that this dairy obtained some of its milk, which was all mixed together, from a particular farm in the country outside Leicester.

At this farm a number of cases of enteric fever had occurred, and as the well water which supplied the farm was found to be contaminated, and as this was used to wash the milk utensils in, the presumption is that this was the original source of infection. The supply of milk from this dairy was stopped from coming to Leicester, and the epidemic at once ceased, after allowing for a few cases which were already incubating the disease.

This is the first milk-borne epidemic that has occurred in Leicester for very many years.

### **Epidemic Diarrhœa and Enteritis.**

During the year the number of deaths registered as due to diarrhœa was 15, and from enteritis 26, or a total of 41. Several of these cases did not occur during the summer months, and should not be regarded as "epidemic." The great decline which has taken place in Leicester in mortality from diarrhœa in infants is one of the most striking and remarkable improvements effected in our local statistics. At one time, 25—30 years ago, Leicester had an unenviable notoriety as regards this disease.

### **Measles.**

Cases notified, 262; Deaths, 1.

During the year 1919 measles gave very little trouble and there were few serious cases. This is probably accounted for by the heavy incidence of the disease during the few years preceding 1919. Thus, in the three years, 1916—1918, during which notification was in force, over 10,000 "first" cases in houses were reported. If secondary cases be allowed for, probably at least 15,000 cases altogether must have occurred during these three years. A large proportion of children, therefore, must have been protected by having already had the disease.

### **Notification of Measles.**

This was made compulsory by an order of the L.G.B. and came into operation at the beginning of 1916. After remaining in force for four years, the new Ministry of Health decided



not to continue it, on the ground that it had served its purpose. Few sanitarians believe that notification of measles has any appreciable effect in preventing epidemics of measles, and so widespread is the prevalence of the disease when epidemics do occur that the expense of notification is a serious consideration, as also is the very large amount of time involved in visiting every house.

At the same time the Ministry of Health insist on the importance of not relaxing other efforts to combat the disease, e.g., provision of nursing and of institutional treatment for serious cases.

### **Whooping Cough.**

Deaths, 11.

The Ministry of Health desire that the same provision which they recommend for measles, as regards nursing and institutional treatment for special cases, should be extended to whooping cough, and there is really no reason why a distinction should be made between them in this respect. Both diseases cause a heavy mortality in early childhood, as well as much permanent injury to health.

### **PUERPERAL FEVER.**

There were 11 cases notified as puerperal fever during the year, and six of these proved fatal. Only four, however, were certified as dying from puerperal fever, one being returned as retained placenta, and in the other case the Coroner returned a verdict of wilful murder for illegal operation.

All cases are investigated and any necessary measures taken.

### **Cerebro Spinal Fever.**

Cases notified, 4; Deaths registered, 8.

Three of the four notified cases proved fatal. Of the five other deaths registered, one was a death "transferred" from another district; three were cases at the Royal Infirmary (from outside districts), and in the remaining case the diagnosis was doubtful.

The etiology of this fatal disease remains obscure. It is associated with a specific organism, the meningococcus, which is found in the cerebro spinal fluid, and the disease tends to occur in epidemics. There appears little if any tendency, however, for it to spread from the sick to the healthy, and those in attendance upon the patients suffering from the disease rarely if ever contract it. Our experience in Leicester hitherto has been that not more than a single case occurs in a house.

### **Acute Poliomyelitis.**

Cases, 3; Deaths, 2.

The old name for this disease was "infantile paralysis." It chiefly affects infants and young children, but not always. Indeed, epidemics amongst adults may occur. The most obvious symptom is paralysis of the legs or arms, usually the former. As in the case of Cerebro Spinal Fever, the way in which it spreads is not yet understood. Usually only one case occurs in a household, and it very rarely spreads from the sick to the healthy. It is a very serious disease, as it is apt to leave more or less permanent paralysis.

### **Encephalitis Lethargica.**

In the last Annual Report, reference was made to an obscure new disease believed to be related or at least similar in character to poliomyelitis. One of the most striking symptoms was drowsiness or lethargy. A number of cases were reported in 1918 in various parts of the country, and some 14 cases had been reported in Leicester; it was mentioned, however, that about half of these were probably not due to the supposed new disease.

The disease has now become known as "Encephalitis Lethargica," the name signifying inflammation of the brain associated with lethargy.

The disease is believed to be due to a specific micro organism, though this has not yet been isolated. How the disease spreads or what causes it is not known. The chief symptoms, in addition to lethargy, are dropping of the upper eyelids, squinting and rise of temperature.

The Ministry of Health has made the disease temporarily notifiable. During 1919 no cases were reported, but a couple of cases have occurred during the early part of the present year (1920).

### VENEREAL DISEASE.

The year 1919 was the third year since the campaign against venereal disease was instituted. There are two distinct lines of attack:—

- I.—Diagnosis and Treatment.
- II.—Educational Propaganda.

#### I.—Diagnosis and Treatment.

Diagnosis and treatment for V.D. are carried out at the Royal Infirmary, under the joint scheme arranged between this institution and the city and county authorities.

Full details of the work done will be found in Table 13 at end of this report, but the following figures give a summary of the city cases only:—

Total number of persons dealt with during the year at Out-Patients' Clinic:—

			Males.		Females.
Syphilis	...	...	218	...	184
Gonorrhœa	...	...	374	...	35
Not V.D.	...	...	5	...	9
Total	...		597		228

#### Total Attendances.

Syphilis	...	...	2152	...	1925
Gonorrhœa	...	...	4693	...	666
Not V.D.	...	...	5	...	12
Total	...		6850		2603

#### Aggregate "In-patient days."

Syphilis	...	...	369	...	367
Syphilis & Gonorrhœa			356	...	332
Not V.D.	...	...	32	...	—

#### Number of doses given of

Salvarsan Substitutes			709	...	699
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There are four male clinics per week, nominally of two hours duration, but frequently lasting longer. Major Blakesley is in charge, and he has now a qualified medical assistant (Dr. Atkinson). He also has a skilled "lay" assistant who attends daily for purposes of giving "irrigation" treatment.

Dr. Bessie Symington is in charge of the female clinics, of which there are three per week at the Royal Infirmary and one at St. Mary's Home. The latter is primarily intended for the girls residing at that institution, but a certain number of unmarried girls are transferred to this clinic from the Royal Infirmary, as it is believed that better influences can be brought to bear upon them at the Home than at the latter institution.

Subjoined are the reports of Major Blakesley and Dr. Symington on work of the clinics during 1919.

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### REPORT BY MAJOR BLAKESLEY in charge of the Male V.D. Clinic.

16, SEVERN STREET,  
LEICESTER.

TO THE CITY AND COUNTY COUNCILS OF LEICESTER AND  
LEICESTERSHIRE.

GENTLEMEN,

I beg to report on the work of the Male Venereal Department of the Leicester Royal Infirmary for the year 1919, under the control of your Councils and the Ministry of Health.

I have received every encouragement and support from the Board of Governors of the Institution, and I have to thank Dr. Mackarell, the Pathologist, for his valuable assistance.

#### NEW PATIENTS.

During the period January 1st to December 31st, 1919, 852 new patients presented themselves for treatment in the Out-patient Clinic, 594 being city patients and 258 county patients. Of these 334 were proved to be suffering from Syphilis and

509 from Gonorrhœa, whilst nine were not suffering from Venereal Disease. These figures show an increase of 510 new patients over the previous year.

#### RENEWED ATTENDANCES.

9,315 renewed attendances were made by patients. 6,817 were city patients, 2,163 county patients, and 15 were from other districts.

#### SPECIAL TREATMENT.

1,170 intravenous injections of Salvarsan substitutes and 1,002 intramuscular injections of Mercury were administered to the Syphilitic cases.

5,405 intra-urethral irrigations for Gonorrhœa were given. Prostatic massage, instillation, and instrumentation for diagnosis and treatment has been carried out in a large number of cases.

This being highly technical work, it is done by the Medical Officers.

#### IN-PATIENTS.

145 male patients were admitted to the wards, 73 requiring operations. 57 being very young, old or feeble, were admitted for intravenous injection of Salvarsan substitute, and 15 for intra-spinal injection of Salvarsanised blood serum, these being patients who were suffering from Cerebro-Spinal Syphilis.

#### ADDITIONAL ACCOMMODATION.

Four Clinics are held weekly, each extending to about three hours. The numbers attending continue to increase. Further accommodation in buildings is necessary, and a self-contained department would conduce to more effective technical treatment, with greater privacy and convenience to the patients.

Additional time and attention by the Medical Officers will be required shortly to cope with the work.

#### MEDICAL ASSISTANCE.

Previous to December, 1919, the House Surgeon of the Royal Infirmary was permitted to give me assistance on two

or three evenings a week, but this, proving to interfere with the general work of the Institution, Dr. Atkinson was appointed as specially qualified Medical Assistant. He has worked zealously and effectively since his appointment.

The benefit of daily treatment is two-fold, firstly to the patient by relieving him of his acute symptoms, and in many cases of all symptoms of his disease, and secondly to the community by rendering him in a few weeks much less dangerous as a medium of infection.

I would emphasise the importance of patients being urged to seek treatment at the earliest opportunity after contracting or suspecting that they have contracted these diseases, as the beneficial effects of early treatment are out of all proportion advantageous to the patient himself as well as to the community by preventing the spread of the disease.

My thanks are due to all who have worked in connection with the Department for their willing assistance and loyal support.

I am, Gentlemen,

Yours faithfully,

HENRY J. BLAKESLEY, F.R.C.S. (Eng.),  
Major R.A.M.C. (F.).

Medical Officer i/c of the Male  
Venereal Diseases Department,  
Leicester Royal Infirmary.

30th January, 1920.

#### REPORT OF FEMALE VENEREAL CLINIC FOR 1919.

During 1919 the Female Venereal Clinics at the Royal Infirmary have been regularly and well attended.

311 new patients have presented themselves for treatment, 228 from the city and 83 from the county.

One Clinic out of the three now held at the Infirmary is set apart for the diagnosis and treatment of mothers and babies, and children under 14 years of age.

This arrangement is appreciated by the mothers, who themselves ask to bring their children for examination. In some cases two, three or even four persons in one family, or dwelling in the same house, have been found to be infected, and treatment has been begun as soon as possible. About 1,351 attendances of children under 14 years have been made.

Pregnant women cannot be prevailed upon to attend regularly, the chief deterrent cause is the publicity of the Waiting Room. Only a few patients sent from the Antenatal Clinics held in the city have had thorough treatment, the majority will not attend.

This important class of patient will only be touched by holding a small Clinic privately where this publicity is avoided.

During the year a new Clinic has been started in the city at St. Mary's Home, the Newarke. This is specially held for the treatment of unmarried girls under 23 years of age. This slightly lessens the number of new patients attending the Infirmary. The arrangement has been made to prevent the young girls from associating with the older married women in the Waiting Room, who are only too anxious to impart undesirable knowledge.

Up to the present time between 40 and 50 cases have been dealt with in this Clinic.

The Infirmary Ward containing 3 beds has been occupied continuously; acute cases, and those suffering from complications have been admitted. One bed is kept, if possible, for the immediate use of a very early case.

This year about 60 per cent. of the new cases have been sent by private doctors for treatment or diagnosis.

The number of patients cured is difficult to report. 12 who began treatment in 1917 and 1918 have reported themselves long enough to fulfil the required tests. 216 are apparently well, but a definite opinion cannot yet be given.

BESSIE W. SYMINGTON, M.D., B.S. (Lond.),  
Medical Officer of Female Venereal Clinics.



## REPORT ON V.D. CLINIC AT ST. MARY'S HOME.

The Clinic commenced on July 31st, 1919. Number of sessions held, 22. Number of patients treated, 40.

Syphilis, 9; Gonorrhœa, 18; S. and G., 4; Not V.D., 5.

Number of patients discharged, 11.

To other Homes (where treatment will be continued), 6.

As Cured: S., 1; G., 3; S. and G., 1; total, 5.

Number of patients discontinuing attendance, 1.

Number of injections given, 48.

Number of operations performed, 1.

Number of anæsthetics given, 1.

Many of the patients treated at St. Mary's Home are very young. Thus one was 16 years, one was 15, two were 14, one was 13, and two were only 12.

No patients over 23 years and no married women are transferred as out-patients from the Royal Infirmary to St. Mary's Home.

BESSIE W. SYMINGTON.

## II.—Educational Propaganda.

Veneral diseases are, of all infectious diseases, the ones we know best how to prevent. In the vast majority of cases they are contracted through a person's own foolishness or that of someone else nearly related to them.

In no other disease does there seem so much hope, therefore, of reducing prevalence by means of active educational propaganda.

In Leicester this part of the campaign has been handed over by the Sanitary Committee to the Local Branch of the Nat. Council for Combating V.D., of which C. A. Bond, Esq., C.M.G., F.R.C.S., is the Chairman.

The following is a summary of the Report of the Branch for the year.

LEICESTER BRANCH, N.C.C.V.D.  
SUMMARY OF THIRD ANNUAL REPORT, 1919-20.

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Chairman: C. J. Bond, Esq., C.M.G., F.R.C.S.

Vice-Chairman: Councillor Johnson. Hon. Treasurer:  
Ald. J. Russell Frears, J.P.

Hon. Secretaries: Dr. C. K. Millard, Town Hall; Mrs. J. Billson, Chitterman Cottage, Ulverscroft.

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During the year ten meetings of the Executive Committee have been held and one meeting of the Branch.

There are now 61 members of the Branch, 28 of whom are on the Executive Committee.

The lectures on Sex Hygiene to scholars attending the Evening Continuation Schools in the City, which were initiated last winter, have been continued during the present session. Evening Classes are held at 13 Council Schools and 53 lectures were given, 26 to boys and 27 to girls, at which 751 boys and 722 girls attended, being 468 in excess of the previous series.

Lectures on Sex Hygiene were arranged for the boys and girls leaving the Secondary Schools at the Midsummer term, namely, Wyggston, Ald. Newton's and Newarke Secondary Schools. A list of the leaving scholars was obtained from the head teachers and letters of invitation were sent to the parents, and on receiving their consent a ticket of admission was sent to the scholars. The Lecture to boys was given by Dr. Douglas White, Hon. Sec. N.C.C.V.D., at which the attendance numbered 94. The girls' lecture was given by Miss Winifred Cullis, D.Sc., of London, when 37 girls attended. These numbers represent a fair percentage of those invited. It is hoped to repeat the lectures at the forthcoming midsummer term.

It was felt very desirable that addresses should be given to parents of school children with a view to advocating that

children should receive enlightenment, when old enough, on the vital question of sex. The Education Authority was approached on the subject with a view to obtaining their consent to a letter of invitation being conveyed to the parents by the children, but although several interviews have taken place we have not succeeded in satisfying the Education Authority that the proposed method of notifying the parents was a desirable one. An attempt has, therefore, been made to hold ordinary meetings to which women were invited by hand-bills distributed in the neighbourhood. Two such gatherings were addressed by Mrs. Billson, but the attendance was rather disappointing, amounting to 67 and 33 respectively. It is believed that had the method of approaching the parents from the schools been followed a very much larger audience would have been obtained.

Mrs. Billson also addressed meetings at Loughborough and Hinckley, large audiences being present.

An item of particular interest was the private exhibition, under the joint auspices of the City and County Branches, of the propaganda film "The End of the Road" which was shown in Leicester on October 21st last, and was attended by about 500 people, comprising representative citizens, clergy, social workers, &c. Efforts have been made to secure the film for public exhibition, but up to the present they have been unsuccessful.

Rev. R. Veitch and Dr. Millard attended the Provincial Conference at Birmingham on July 11th and 12th. Mr. Bond, Dr. Millard, Mrs. Billson and Miss Pell-Smith attended the Branch Conference in London in November. Mr. Bond attended the Annual Meeting of the National Council in London.

### **TUBERCULOSIS.**

Figures for year 1919.

	Cases notified.		Deaths.	
Pulmonary Tuberculosis (phthisis)	...	658	...	264
Other forms of Tuberculosis	...	47	...	62
		<hr/>		<hr/>
Total	...	705	...	326
		<hr/>		<hr/>

During the year a very welcome decrease occurred in the number both of fresh cases notified and of deaths registered, especially the latter.

This is shown by the following figures :

Year	Phthisis cases notified.	Phthisis Deaths.
1913	872	301
1914	730	273
1915	901	325
1916	730	306
1917	655	343
1918	746	316
1919	658	264

A considerable increase both in cases and deaths occurred during the war, and it is thought probable that the war and the conditions arising therefrom (e.g. increased working strain and food shortage) were responsible for this; certainly the striking reduction that has occurred since the armistice was signed seems to support this suggestion.

As is well-known, the mortality from phthisis is unduly high in the boot and shoe trade. The subject was specially studied some years ago by the Medical Research Committee of the National Health Insurance Commission, who appointed a sub-committee to investigate the subject. The investigation was carried out chiefly in Leicester and Northampton, and in due course a report containing recommendations of a rather general kind was published.

With a view to making these recommendations more widely known, a letter drawing attention to them, has recently been sent by the Sanitary Committee to the secretaries of both the Boot and Shoe Trade Employers' Federation and the Boot and Shoe Trade Council (the Employees' Organisation).

### **Institutional Treatment.**

As regards the provision of institutional treatment for tuberculosis, Leicester is fairly well off. About 188 beds are at present reserved at the City Hospital and Sanatorium. Of these, 90 are for ordinary sanatorium patients, 50 are for hospital cases, and 48 are for children. The latter are treated

at the Anstey Lane Branch Hospital. They are mostly incipient cases, but cases of advanced disease in children urgently needing institutional treatment have to be accommodated occasionally.

Hitherto no provision has been made for the treatment of surgical tuberculosis in children. Such cases are not very numerous, but require treatment for very prolonged periods, say two to three years, and should be sent to special institutions, where special facilities are provided for this class of case.

There are not enough of these cases in Leicester to justify a separate local institution. Probably the best plan, therefore, would be to arrange with some institution away from Leicester. This is the method recommended by the Ministry of Health.

For further reference to tuberculosis see Appendices I. and II.

### **GOITRE (Enlargement of Thyroid Gland.)**

For the last year or two there has been some reason to think that the affection known as goitre or "Derbyshire Neck," which is manifested by enlargement of the thyroid gland, has been on the increase. It is necessary, however, to observe that the prevailing fashion amongst young women of wearing blouses open at the neck, would naturally make the existence of any enlargement of the thyroid more apparent, and thereby might easily give the impression that the affection was more common than used to be the case. In the absence of exact records this introduces an element of considerable uncertainty as to whether the increase is real or only apparent.

An inquiry issued by the M.O.H. to general practitioners in the city last year gave the following result:—About half the doctors who replied said that they had not noticed any increase, others thought that they had, whilst two or three answered emphatically that they were quite satisfied that an actual increase had taken place.

Dr. Warner, the School Medical Officer, has been giving the matter attention, and also believes that an increase has

taken place. In his annual report for 1919 he includes a report on the subject from Dr. A. C. Turner, Assistant Medical Officer.

Dr. Turner states that out of 11,244 children examined, enlargement of the thyroid was found in 195 cases, or a percentage of 1.8. The chief proportion was amongst girls leaving school, viz. 5.8 per cent., only a few cases occurred amongst boys, the affection chiefly affecting females.

The above figures were obtained from children seen in the course of routine examinations.

In order to obtain further data, all the scholars at two schools (Medway Street and Green Lane) were specially examined, these schools being selected because of the large number of affected children which had been observed in them. It was found that taking all the scholars from standards 1 to 7, 98 children out of 1,596 examined, or 6.1 per cent., showed signs of being affected. Moreover, it was found that quite a considerable number of boys as well as of girls were affected. The figures for these two schools were therefore apparently much above the average for the whole city.

The figures for 1919 show a decided increase upon previous years, though as Dr. Turner points out, last year, for the first time, definite search for the affection was made. This is an important consideration.

The M.O.H. has made inquiry from several other towns as to whether any increase has taken place. Several towns are inclined to think that this is so, but few can speak very definitely.

The etiology of goitre is very obscure. The latest theory as to its cause is that it is due to a specific germ which, however, has not been identified. In extreme cases the affection is very disfiguring.





## PART III.

### Administrative and General.

Factory Acts, Housing, Maternity and Child Welfare, &c.

#### ADMINISTRATION OF FACTORY AND WORKSHOPS ACT, 1901.

In connection with Factories, Workshops, Workplaces and Home Work.

Report of the Medical Officer of Health for the year  
1919 for the County Borough of Leicester.

#### 1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors  
of Nuisances.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
(1)	(2)	(3)	(4)
Factories ... ..	123	20	None
Workshops ... ..	366	42	None
Workplaces ... .. (other than Outworkers premises)	None	None	None
Total ... ..	489	62	None

#### 2.—Defects found in Factories, Workshops and Workplaces.

Particulars.	Number of Defects.			Number of Prosecu- tions.
	Found.	Remedied	Referred to H.M. Inspector.	
(1)	(2)	(3)	(4)	(5)
Nuisances under the Public Health Acts:—				
Want of Cleanliness ... ..	28	20	None	None
Want of Ventilation ... ..	1	1	..	..
Overcrowding ... ..	None	None	..	..
Other Nuisances ... ..	28	19	..	..
Sanitary Accommodation				
Insufficient ... ..	5	4	..	..
Offences under the Factory and Workshop Act ... ..	None	None	..	..
Total ... ..	62	44	None	None

### Home Work.

The number of lists received from employers was as follows :

	Twice in the year.		Once in the year.	
	Lists.	Outworkers.	Lists.	Outworkers.
Wearing Apparel (making)	44	1321	29	254

### Registered Workshops.

The number of workshops on the Register is 760.

## HOUSING.

The total number of inhabited tenements at the last census was 51,481. As there are very few tenement houses in Leicester, the number of tenements is practically the same as the number of houses. In July, 1919, the number of tenements as returned by the overseers was 54,306. During and since the war building operations, until quite recently, have been virtually suspended. During the year under review only five houses were completed, but plans have been deposited for 161, and this number will, it is hoped, be much increased in 1920.

### Shortage of Houses.

A very serious housing shortage exists in Leicester as in so many other places, and this has become much more acute since the termination of the war and the return of many thousands of service men. There are not nearly enough houses "to go round," and every house is "snapped up" as soon as it becomes vacant or, indeed, some time beforehand.

Many houses are overcrowded, especially where two or even more families are sharing a house. From the health point of view, and also from that of decency and morals, such a state of things is much to be deplored. Moreover, the hardships involved is in many cases extreme. The plight of many families has been pitiable indeed. Exorbitant charges for any kind of accommodation is being asked, and people have no option but to pay. The Corporation has been most anxious to provide more houses but serious difficulties, financial and other, have stood in the way. The nature of these is well-known as the subject has been much discussed in the press.

The Coleman Road Scheme, which provides for the erection of 350 six-roomed cottages on garden suburb lines, at approximately £1,000 per house (including land, laying out streets, sewerage, etc.) is at last being carried out, and it is expected that many of the houses will be in occupation this year. When the scheme is completed it will, it is hoped, serve as an object lesson as to how a modern city should be developed on proper hygienic lines, and it should tend to improve the standard for working-class houses in the district. The houses will be in detached blocks and will vary considerably in character so as to have an individuality of their own, and there will not be more than 12 to the acre. This is most important. There can be no doubt as to the advantage of providing ample garden ground to almost every house in laying out new suburban sites. It is sometimes said that not every working man desires a garden. I believe the great majority of able-bodied men do desire a garden, and those who do not should be encouraged by giving them gardens. In any case there will always be an overwhelming number of old houses in the city which are without gardens, so that those people who do not want gardens are already well provided for. Every home worthy of the name should have as much ground in close proximity as a man can usefully cultivate in his spare time. With longer evenings owing to the advent of "Summer time," and with shorter working hours in the factory, working men have now much more spare time, and it is eminently desirable for many reasons that they should be afforded every facility for spending it in the cultivation of vegetables, fruit and flowers. There is no better and healthier recreation than gardening for men (and women too) who have to spend the greater part of the day working in crowded factories and workshops. Nothing is better calculated to counteract the tendency to tuberculosis generated by factory life. The alternative to working in the garden will too often be the crowded place of amusement indoors.

As against the increased cost of providing plenty of land to every house is the fact that most men will gladly pay for the full value of the land in the form of increased rent. A veritable hunger for garden ground exists in Leicester, and although an "allotment piece" at a distance from the home

is a poor substitute for a garden attached to a house, and although the number of allotments in Leicester has been approximately doubled since pre-war days, yet practically every allotment is eagerly taken up, and many men desirous of more land, and able to cultivate it, are unable to obtain it.

### **Housing of Working Classes Acts.**

The following statement shows the number of houses dealt with during 1919:

Number of dwelling houses inspected under and for the purpose of Section 17 of the Housing, Town Planning, etc., Act, 1909	...	...	...	6,687
Number of dwelling houses which on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	68
Number of representations made to the local authority with a view to the making of Closing Orders	...	...	...	68
Number of Closing Orders actually made:—				
Housing and Town Planning Act	...			0
Local Act	...	...	...	0
Number of dwelling houses the defects in which were remedied without the making of Closing Orders	...	...	...	6
Number of dwelling houses which after the making of Closing Orders were put into a fit state for human habitation	...	..	...	0
General character of the defects found to exist	<div style="display: flex; align-items: center;"> <div style="font-size: 3em; margin-right: 10px;">{</div> <div> general dilapidation and want of repair. </div> </div>			
Number of dwelling houses in which repairs are in hand	...	...	...	62

### **MATERNITY AND CHILD WELFARE.**

This branch of the work of the Health Department continues to increase and develop and it may now be regarded, as it should be, as one of the most important of the Sanitary Committee's activities.

Amongst the extensions and new developments during the year may be mentioned the following :

(1). The appointment, under the provision of the Maternity & Child Welfare Act, of a special Maternity & Child Welfare Committee. This consists of the full Sanitary Committee, together with four co-opted women members. There is a Sub-Committee, consisting of ten members of the Sanitary Committee, plus the co-opted women members. This sub-committee meets monthly (first Wednesday).

(2). The appointment of an Assistant Medical Officer (woman) to take charge, under the M.O.H., of the Maternity & Child Welfare Work of the Health Department. Dr. Ada Macmillan, one of the Resident Medical Officers at Groby Road Hospital, was appointed to the position, and took up her new duties in April. These duties comprise : (a) Supervision of the Health Visitors; (b) Supervision of Midwives; (c) Attendance at Infant Clinics at the Schools for Mothers (as there are too many of these for her to attend them all, she has some assistance from general practitioners); (d) Attendance at Pre-Natal Clinics; (e) Supervision of Grants of Milk &c., to necessitous maternity cases.

(3). The appointment of a Superintendent Health Visitor and Assistant Supervisor of Midwives; Mrs. Reed, one of the Health Visitors, was promoted to this post.

(4). The increase of the staff of Health Visitors from six to nine. This is in addition to the Manageress of the Milk Depot and Health Visitor engaged by the Newton Ward Centre but includes one (Mrs. Hartshorn) who devotes most of her time to the Scabies Bathing Station. One, Nurse Payne, only put in half time for part of the year.

(5). The opening of an additional School for Mothers, the eleventh (in connection with St. Hilda's Parish).

(6). The opening of a second Pre-natal Clinic; (one is held at the Infant Milk Depot one morning a week, the other at the Maternity Hospital, Causeway Lane, on one morning and one afternoon a week.)

(7). The opening of a Maternity Home,

It will be admitted that the above list indicates very considerable progress, greater indeed than in any previous year so far as this branch of the work is concerned. All the extensions and developments move along the lines laid down and advocated by the Ministry of Health, and the expenditure incurred will all rank for the Government grant of 50 per cent.

### Health Visitors.

The following is a tabular statement of the work done by the Health Visitors during the year. Obviously such a statement can only give a very general idea of the amount of work actually accomplished.

#### RETURN OF WORK DONE BY HEALTH VISITORS.

Visits to Births (first visits) ... ..	3470
Re-visits to Births ... ..	8797
Visits to Measles cases ... ..	226
.. .. Ophthalmia cases ... ..	352
.. .. Pre-natal cases ... ..	556
.. .. Scabies cases ... ..	606
Special visits and in connection with Schools	
for Mothers ... ..	1291
Attendances of H.V.'s at Schools for Mothers	125
.. .. Pre-natal Clinics	46
.. .. Bathing Stations ...	121
Visits to Midwives ... ..	80

Each Health Visitor attends one or more afternoons a week at one or other of the Schools for Mothers.

### The Leicester Health Society.

This Society has been in existence for some 13 years. Its chief work is the running of the various Schools for Mothers, of which there are now eleven in the city. The Sanitary Committee of the Corporation has now undertaken almost the entire financial responsibility for these schools, paying the rent of the premises, providing the equipment, and paying salaries of medical officers and nurses. On the other hand, the Health

Society still pays the salary of Miss Prior, who now devotes most of her time to giving lectures and addresses on various health topics, largely at the Schools for Mothers. The Society also provides all the voluntary workers including the Superintendent of each School, who is, *ex-officio*, a member of the Council of the Society.

### **“ Schools for Mothers.”**

The addresses of the various “ schools,” names of Superintendents, and days when held are as follows:

	School,	Superintendent.	Day.
1.	Western Road.	Mrs. Pochin.	Monday.
2.	Curzon Street.	Mrs. Turner.	Monday.
3.	Knighton St.	Miss Windley	Tuesday.
4.	Wellington St.	Mrs. Evans	Tuesday.
5.	Bedford Street.	Mrs. Millard.	Tuesday.
6.	Wesley Hall.	Mrs. Leadbeater.	Tuesday.
7.	Clarendon Park	Mrs. Partridge.	Wednesday.
8.	Overton Road.	Mrs. Cuffin.	Wednesday.
9.	Belgrave Hall.	Mrs. Mantle.	Thursday.
10.	Justice Street.	Mrs. Disney.	Thursday.
11.	St. Hilda's.	Mrs. Marson.	Monday.

### **Infants' Milk Depot.**

The Infants' Milk Depot, run by the Corporation, has now been in operation for 15 years and has long since proved its great utility. 310 cases remained on the books on January 1st, 604 new cases were admitted; 524 were discharged; and there were remaining on the books, December 31st, 390.

Infant Consultations are held at the Depot twice a week by Dr. Macmillan. The total attendances of infants at them was 1753, the total number of consultations being 95, giving an average attendance of 18.4. The number of infants brought to the Depot to be weighed and for advice, apart from the consultations, was 4619.

Test feeds have frequently been given and many mothers have been persuaded by this means to continue breast feeding.

The balance sheet for the financial year ending March 31st, 1920, was (according to City Treasurer): Payments,



£4636 19s. 8d.; Receipts, £4354 11s. 8d.; Payments in excess of Receipts, £282 8s. 0d. Half of this deficit will be met by the Government grant.

### **The Newton Ward Infant Consultation Centre.**

This Centre was started some six years ago by a committee of social workers in memory of the late Mrs. H. H. Peach, and has accomplished excellent work. It differs somewhat from the Schools for Mothers of the Health Society, as it has its own premises in Higheross Street. It employs a wholetime Health Visitor, Nurse Masters, who acts for Newton Ward, working in close co-operation with the Health Department. It has now been arranged that she shall include in her district Newfound Pool and Woodgate as well as Newton Ward. The Sanitary Committee has undertaken to pay the rent of the premises together with rates, coal, gas, and the salary of the medical officer. It is gratifying to note, as has been mentioned already, under "Ward Statistics," that the infant mortality in Newton Ward last year was the lowest on record.

### **The Leicester Day Nursery Society.**

This Society has provided and during 1919 carried on three Day Nurseries. Owing to insufficient funds, however, they have now (March, 1920) only two, one in Rutland Street and one in Talbot Lane. The third Nursery in Melton Road has been given up, and the premises have been opened by the Leicester County Council as a hostel for unmarried mothers.

The Corporation made a grant during 1919 of £100, and a substantial grant (half the net deficit) is also made by the Ministry of Health.

Most people will agree that the principle of the crèche or day nursery is very far from ideal, and that mothers should be encouraged to stay at home and nurse their own children rather than put them out to nurse and go to work. At the same time, in the present state of society, there are undoubtedly certain cases (and in a large city these cases amount in the aggregate to a considerable number) where the mother is virtually forced to go to work in order to supplement the family



income. In such cases she has no option but to put the baby out to nurse, and in the interests of the baby it is clearly much better that it should be looked after in a well-managed day nursery rather than that it should be handed over to any woman, however unsuitable, whom the poor mother can persuade to take charge of it.

To prevent abuse, however, it is important that the greatest care should be exercised only to admit cases where a real necessity exists. An investigation should be made into the circumstances of every case applying for admission, and efforts should be made to persuade the mother to remain at home.

Day nurseries can only be justified if well-managed and adequately staffed, and there must be no over-crowding. This means that they cannot be run "on the cheap," and there will inevitably be a financial deficit, which may be considerable. It is an open question whether it might not be better if the money which it costs to subsidise day nurseries were spent in subsidising mothers to stay at home.

As regards the Leicester Day Nursery Society, it came into existence during the war, at a time when women's work was badly needed in the factories, and when the need for day nurseries was exceptionally acute. The war is now over, but it is felt that, for a time at any rate, the need for some provision in the way of day nurseries still exists. The Society has done its work well and has spared neither pains nor expense to make the day nurseries efficient, but it now finds the financial burden too heavy, and is approaching the Corporation with a view to the latter body taking the nurseries over.

### **Municipal Maternity Home.**

During the year strong representations were made to the Sanitary Committee, notably by deputations from the Women's Co-operative Guild and the Medical Profession, that there was urgent need for more institutional accommodation for lying-in women. This need arose largely from the fact that so many young married women had no homes of their own, owing to the housing shortage, and were either in lodgings or were living with friends.

Enquiries at the existing Maternity Hospital, Causeway Lane, revealed the fact that that institution was quite unable to accommodate all the women desirous of obtaining admission and were turning away large numbers. They were requested to take down the names and addresses of the cases they could not accommodate, and at the end of a few weeks a list of nearly one hundred was obtained.

The Committee of the Hospital were approached and asked if they could provide increased accommodation, but they replied that this had already been considered, and found to be impracticable. Other institutions were approached to see if any arrangements could be made with them, but the only one willing or able to help was the Poor Law Infirmary, and it was felt that such accommodation would scarcely meet the situation.

The Sanitary Committee then decided that they must themselves provide a Maternity Home, and after looking at a number of large houses which were on the market, agreed to purchase Westcotes Grange, a well-built mansion standing in its own grounds, the necessary sanction of the Ministry of Health having been obtained.

In addition to the mansion and grounds, there are two paddocks, the area of the whole site being about  $4\frac{1}{2}$  acres. Some of this land could of course be utilised for other purposes.

Certain structural alterations are necessary in order to adapt the mansion for the purpose of a lying-in institution; e.g., the provision of additional lavatories and bathrooms, the instalment of central heating, fitting up a labour ward and receiving room; and these are now being carried out. It is hoped that the institution will be ready for occupation by Midsummer, when the tenancy of the temporary lying-in home, referred to below, expires.

There is good reason to believe that Westcotes Grange will prove to be admirably suited for the purpose in view, and will be one more addition to the many excellent public institutions of which the City of Leicester has good reason to be proud.

### **Temporary Maternity Home: Babies' Nursing Home.**

As the need for additional accommodation was urgent, it was decided to take action at once, without waiting until the permanent premises were available. An arrangement was accordingly come to with the Leicester Health Society to take over the Babies' Nursing Home in Victoria Road for the remainder of the tenancy which expires in June, 1920.

The sick babies were transferred, together with the staff, to the Groby Road Hospital, where a small block, capable of accommodating 16 babies, was set apart for this purpose; and the Victoria Road premises were thereupon opened, in December, 1919, as a temporary Maternity Home, after the necessary staff had been secured.

### **Terms of Admission.**

The terms ultimately decided upon—after much discussion for admission to the Maternity Home—are as follows:—  
 Ordinary patients will pay £2 2s. a week, and in ordinary circumstances will remain two weeks. A deposit of 10s. will be made at the time of booking. Discretion is given to the Medical Officer of Health to reduce the fees in necessitous cases. Those able to pay more than the ordinary fees will be admitted as private patients at £4 4s. per week.

### **The Need for a Maternity Home.**

Reference has already been made to the urgent need for more lying-in accommodation owing to the acute housing shortage in Leicester. There is reason to think that this shortage will continue more or less for a considerable time to come. The housing schemes already commenced, together with further schemes which may be undertaken, will no doubt help considerably to ease the situation, but if the wave of industrial activity and commercial prosperity continues—as it seems likely to do—more workers will be attracted to the city as fast as houses can be built, and so the congestion will continue. Apart from this, however, wherever satisfactory Maternity Homes exist, and the advantages they offer are realised, it is likely that women will more and more tend to make use of them.

### **The Maternity Hospital, Causway Lane.**

This institution has been in existence for many years, and has accomplished most excellent work. It can accommodate if necessary, about 21 patients. During 1919, 388 confinements took place the largest number hitherto recorded. As already mentioned, it was quite unable to cope with the applications for admission, and large numbers had to be refused.

The institution, under the capable and sympathetic supervision of the Matron, Miss Gray, is deservedly very popular. The New Municipal Maternity Home will not be in any sense in opposition to, or in competition with the older institution, nor is there any idea that the latter will no longer be required.

As already stated, if the Committee of Management had been able to increase the accommodation, the Sanitary Committee would not have thought of opening a separate institution of their own.

### **Milk (Mothers' and Children's) Order, 1918.**

Milk is supplied free or at half-price to cases considered to be "necessitous." The procedure adopted is as follows:—Application forms (giving particulars as to number and age of children, earnings of parents, cause of apparent necessity, whether mother is suckling or not, etc.) are filled up by the Health Visitor after visiting the home. These are submitted to the Medical Officer in charge of Maternity and Child Welfare Work, who decides upon the quantity of milk to be allowed, for what period, and whether at half-price or free. The forms are then submitted to the M.O.H. for his endorsement. The quantity of milk is based on the scale laid down by the Ministry of Health for mothers expectant or nursing, and for children under five years. The period is usually from four to six weeks, though this is sometimes extended after further enquiry. Free grants are only made in exceptional cases. During the year the amount of milk supplied free was 379 gals., and at half-price 1,986 gals. In addition, dried milk to the value of £5 1s. 0d. was supplied free, and to the value of £99 11s. 6d. at reduced rates.

### **Supervision of Midwives.**

With the appointment of an Assistant Medical Officer to devote her whole time to Maternity and Child Welfare Work, it has been possible to give rather more time to supervision of Midwives than was formerly the case.

Dr. Macmillán reports that the work of the Midwives has been fairly satisfactory, and no serious breach of the rules was reported during the year.

There are now 29 midwives practising in the city, and a list of their names and addresses is given in Table XIV.

### **Ophthalmia Neonatorum.**

(Ophthalmia of the Newly-born.)

There were 108 cases of this serious affection notified, 22 being reported by doctors, 77 by midwives, three by Health Visitors and six by doctor and midwife. Eight of the cases reported by midwives were probably not ophthalmia, but owing to there being slight discharge were reported in order to be on the safe side. Of the remaining 100 cases, 85 were finally reported as having quite recovered, eight died, one occurred in the P.L. Infirmary, and two left the town, one lost the sight of one eye, and three cases were still under treatment.

All cases other than those in institutions are visited repeatedly by the Health Visitors to make sure that treatment is being given, either under a private medical practitioner or at the Royal Infirmary. In cases where the child has to go to the latter institution difficulty is often experienced in getting anyone to take it, as it usually means a daily visit and sometimes twice a day. In such cases, if the circumstances call for it, we secure a neighbour to undertake this duty, and make ourselves responsible for paying her.

### **BATHING STATION FOR SCABIES.**

As was stated in the last Annual Report, a bathing station for the treatment of scabies was opened early in 1919. Great difficulty was experienced in finding suitable premises for the purpose, and ultimately it was decided to fit up the top floor

of the Tuberculosis Dispensary in St. Nicholas Street for this purpose? Two rooms are available, one serving as a waiting room, and the other being the bathing room provided with one bath. Hot water is provided by means of a gas sun-burner and cylinder. A cupboard is provided in the yard where clothing can be stoved by burning sulphur. One of the Health Visitors (Mrs. Hartshorn) has been placed in charge, and is assisted by a woman who is paid by the hour. The accommodation is limited, and it can only be utilised at certain times when tuberculosis patients are not attending the Dispensary. Still, it has served a very useful purpose, and is a great deal better than nothing.

The following return shows the amount of work accomplished during the year:—

Cases of Scabies treated: Boys, 107; Girls, 99; Adults, 12. 41 of the cases were sent by medical practitioners. 41 cases discontinued treatment before being cured (six were in one family, four were removed to the P.L. Infirmary); 19 cases after being discharged as apparently cured returned for further treatment after varying intervals. The wearing apparel of each patient is stoved by burning sulphur in the special cupboard provided in the yard outside.

Great appreciation has been expressed by some of those who have been treated at the benefit they have received. Scabies is a most objectionable complaint and is often very intractable and difficult to get rid of. Many of the patients had suffered from the complaint for long periods. There can be no doubt that some public provision for dealing with it is very necessary.

Dr. Thomson has undertaken to exercise the requisite medical supervision.

### **ALCOHOL AND PUBLIC HEALTH.**

It is the duty of a Medical Officer of Health to study and comment upon all influences affecting or likely to affect the health of a community. The consumption of alcohol is certainly such an influence. It is unnecessary to discuss whether

the consumption of alcohol in strict moderation is inimical to health. Too many persons undoubtedly exceed the limit of strict moderation, though probably very many who do so are unaware of this. In the interests of health the increased restrictions placed on the sale of drink, including the greatly increased price, should be warmly welcomed by all who are anxious to see the health and true welfare of the community improved.

The U.S.A. have recently inspired the world by furnishing an example of a great nation deliberately deciding that it is better for a community to be altogether without alcoholic beverages. It is probable that sooner or later other countries will follow America's example and will also vote for prohibition. When that time comes in Great Britain all health officers ought warmly to welcome it. I believe that there is no other single legislative measure, which it is within the power of a community to deliberately adopt, which would have so great and far-reaching an effect for good upon the public health. It would be rash to prophesy how long it will be before the people of this country come to realise this, but that the time will come some day I myself have little doubt, and it is quite possible that the time may come sooner than some people appear to think.

### **CREMATION.**

The number of cremations which took place at the Crematorium at Gilroes during 1919 was 36. This is some reduction on the figure (43) for the previous year, but the latter was inflated owing to the influenza epidemic, no less than eight of the persons cremated in 1918 having died from influenza. Excluding the year 1918, the cremations in 1919 were higher than in any previous year.

It has always been the case that those who choose cremation in preference to earth burial are mostly persons of some intellectual distinction, who think things out for themselves and choose what they believe to be best rather than follow the dictates of custom and tradition.

When we consider the strength of the tradition associated with the disposal of the body after death, it is not really surprising that the practice of cremation has not made more rapid progress. Still some progress is being made even though it is slow.



## APPENDIX I.

# REPORT

## OF THE

# TUBERCULOSIS DISPENSARY

**For 1919,**

BY WYVILLE S. THOMSON, M.D., D.P.H., Edin.  
*Tuberculosis Medical Officer.*

**Staff.**

During the year the medical work has again been carried on single-handed by Dr. Thomson. After nearly seven years of most satisfactory service, the two nurses resigned, Nurse Calvert taking up similar duties at Sowerby Bridge and Nurse Sprigg being appointed Tuberculosis Nurse at Plymouth. They have been succeeded by Nurse Sanson and Nurse Anderson, both of whom are proving satisfactory in every way. The clerical work is still carried on in a most capable manner by Miss Chaplin.

Patients on treatment are seen every Tuesday and Friday between 10 and 1 o'clock, and those at work on Mondays and Thursdays between 6 and 8. Chest examinations are made in the forenoons when time permits, and every afternoon is devoted to this work.

**Number of Notifications and Deaths.**

There has been a great reduction in the number of persons notified as suffering from Tuberculosis during the year 1919 as compared with 1918, the numbers being:

1918	...	Pulmonary, 746; Non-pulmonary, 82
1919	...	Pulmonary, 658; Non-pulmonary, 17

A similar gratifying result has also taken place in the number of deaths from Tuberculosis, the numbers being:

1918	...	Pulmonary, 346; Non-pulmonary, 82
1919	...	Pulmonary, 261; Non-pulmonary, 62

### **The Dispensary as a Centre for Diagnosis.**

The medical men of the city as well as the general public now fully realise the value of the Dispensary as a "Centre for Diagnosis." During the year under consideration 219 cases were sent by doctors for an opinion, and quite a large number of persons not under medical attention were examined if there were any suspicion of Tubercle. In addition, Dr. Thomson (who was appointed Medical Referee to the Pensions Committee) examined 145 ex-soldiers either suffering from or with symptoms suggestive of Tuberculosis.

### **Examination of Contacts.**

During the year 1918, much of the Medical Officer's time was spent in examining recruits and specimens of sputum for the Military authorities, with the result that comparatively little time was available for examination of contacts. During the past year, however, more time has been devoted to this important work, those contacts having symptoms of phthisis having been examined. Unfortunately it has not been found possible to examine all contacts, the work as Medical Referee demanding a considerable portion of the Medical Officer's time.

### **Chest Examinations.**

The following figures give the number of chest examinations :-

	Men.	Women.	Children.	Total.
First Examinations ...	296	245	129	670
Re-examinations ...	157	80	21	258

### **Bacteriological Work.**

493 specimens of sputum have been examined, of which 355 were sent by Medical Practitioners, and 138 from patients examined at the Dispensary.

### **Number of Patients Treated at Dispensary.**

Patients remaining December 31st, 1918 ...	76
New Patients admitted ... ..	154
Discharged ... ..	118
Remaining December 31st, 1919 ... ..	112

All of the 112 patients on the books at the end of the year were adults, of whom 62 were at work and 50 were unfit for work.

The total number of attendances of patients for treatment during the year was 7,833.

### Results of Treatment.

The following Table gives the result of Dispensary Treatment:

		Much Improved.	Improved.	No Improvement.	Worse.	Total.
Stage I.	...	15	25	4	1	45
I-II.	...	6	18	2	0	26
..-II.	...	3	17	11	0	31
II-III.	...	2	4	1	0	7
III....	...	0	4	5	0	9
Total	...	26	68	23	1	118

### Tuberculin Treatment.

As in previous years, tuberculin has been given to suitable patients desiring this form of treatment.

### Sleeping Shelters.

We have twelve shelters available for lending to patients for use on their own ground, free of charge. During the year 12 persons have had use of the shelters—four for under 12 months, two for over 12 months, one for over two years, three for over three years, one for over four years, and one for over six years.

### Visits.

The Dispensary nurses made a total of 2,653 visits, including 793 first visits, and the Medical Officer paid 161 visits

The visits have in the majority of cases been made to pulmonary cases, but visits were also paid by the nurses to non-pulmonary cases, e.g., glandular and joint cases. Advice, both verbal and printed, is given, and particulars obtained. Where defects are found in the houses they are reported to the Sanitary Inspector.

### **After-Care.**

As arranged with the Sanatorium Benefit Sub-Committee of the Insurance Committee, after-care visitation has been carried out by the Dispensary Nurses. Dr. Thomson and one of the nurses have attended the committee meetings each alternate month, and reports on 931 visits have been made.

### **After-Results of Treatment.**

On the suggestion of the Chairman, Ald. Windley, an endeavour was made to find out how many of the patients treated during 1916 were still alive and their condition. An enquiry form was sent to each of the 499 patients who had Sanatorium Treatment during that year, with the following results:—

- 212, or 42.5 per cent., are known to be dead.
- 229, or 45.8 per cent., are known to be alive.
- 58, or 11.6 per cent., have removed and cannot be traced.  
(28 of these are known to have left Leicester.)

Deducting the 58 whom we have been unable to trace we get the following results:—

Number treated	...	...	441
Known to be alive	...	...	229 or 51.9 per cent.
Known to be dead	...	...	212 or 48.1 per cent.

Enquiry forms were sent to all patients believed to be alive.

208 have been returned completed as required and these have been classified into 4 groups:—Class I., Very Satisfactory; Class II., Fairly Satisfactory; Class III., Indifferent Health; Class IV., Getting Worse.

In the first two groups the patients are generally at work or at school.

CLASS I.				CLASS II.			
Men.				Men.			
Insured	...	...	24	Insured	...	...	16
Non-Insured	...	...	5	Non-Insured	...	...	3
Women.				Women.			
Insured	...	...	40	Insured	...	...	23
Non-Insured	...	...	8	Non-Insured	...	...	6
Children.				Children.			
Boys	...	...	20	Boys	...	...	7
Girls	...	...	22	Girls	...	...	9
Total				Total			
119				64			

CLASS III.				CLASS IV.			
Men.				Men.			
Insured	...	...	3	Insured	...	...	2
Non-Insured	...	...	1	Non-Insured	...	...	0
Women.				Women.			
Insured	...	...	6	Insured	...	...	0
Non-Insured	...	...	1	Non-Insured	...	...	0
Children.				Children.			
Boys	...	...	6	Boys	...	...	1
Girls	...	...	5	Girls	...	...	0
Total				Total			
22				3			

In addition, 21 known to be alive failed to return the forms and though repeatedly visited by the Nurses it has not been possible to obtain the necessary particulars to allow of their being classified in the above groups.

Though such a large number of those treated are known to be dead, it must be remembered that patients in all stages of the disease were accepted for treatment—in fact quite a number of dying cases were admitted in order to remove a source of danger to other members of the family, or in order that they might receive proper nursing and care which were unobtainable at home.

One encouraging result of the enquiry is that the great majority of those who have returned the enquiry forms are now in good health and at work, (Class I. and II.). These total 183 as compared with 25 (Class III. and IV.) whose condition of health is still unsatisfactory.

Roughly speaking, one-half of the patients treated in 1916 are dead and the other half are well and at work.

This result appears to compare favourably with similar enquiries made by other towns.

W. S. THOMSON.

Medical Officer.

## APPENDIX II.

## REPORT

ON THE

City Isolation Hospital and Sanatorium  
for year 1919.

The Leicester City Isolation Hospital and Sanatorium is situated on the Groby Road about one mile from the outskirts of the city.

The Isolation Hospital portion was built 20 years ago, whilst the Sanatorium portion was added in 1915. The latter provides accommodation for 72 Tuberculosis patients. As this is not sufficient for this disease, two of the blocks of the Isolation Hospital are also utilised for tuberculosis, whilst the smallpox hospital in Austey Lane—a quarter of a mile away—has been utilised, for a number of years, for tuberculosis in childhood.

Towards the end of the year under review, it was decided to transfer the sick infants from the Babies' Home in Victoria Road to the Groby Road Institution, and a small block was set aside for the purpose of receiving them.

The total accommodation of the combined institution, as at present utilised, is as follows:—

Tuberculosis in Adults	...	...	140	beds.
Tuberculosis in Children	...	...	48	..
Infectious Cases	...	...	118	..
Infants'	...	...	16	..
				—
Total	...	...	322	..
				—

The infectious diseases treated are scarlet fever, diphtheria, typhoid fever, measles, cerebro-spinal fever, and occasionally, in special cases, erysipelas, whooping cough, chickenpox, encephalitis lethargica, etc. During the great epidemic, influenza was also admitted.

During the war all cases sent by the Military Authorities, whether suffering from wounds, ordinary sickness or infectious disease, were grouped together as "Military Cases." This practice has been followed, although the only military cases now dealt with are infectious cases.

The number of new cases admitted during the year 1919 was as follows:—

Tuberculosis in Adults	...	...	460
Tuberculosis in Children	...	...	154
Infectious Cases	...	...	812
Military Cases	...	...	45
Infants (none admitted till Dec.)	...		16
			—
Total	...		1487
			—

This number is considerably less than for the last few years owing to the fact that the admission of convalescent sick and wounded soldiers has now ceased. During the war these formed a large proportion of the cases treated at Groby Rd.

The complete return of patients admitted, discharged or died is given in Table A; whilst the number of patient-days for each category is shewn in Table B.

### **Scarlet Fever.**

417 cases of this disease were admitted, and three of these died, shewing a fatality of less than one per cent. There is nothing fresh to report about this disease. It is now, happily, a far less serious affection than was formerly the case.

### **Diphtheria.**

269 cases were admitted, and there were 24 deaths, shewing a fatality of 8.9 per cent. Intubation was performed in eight cases, six of which recovered; and tracheotomy in nine cases, and six of these also recovered.

The importance of medical practitioners losing no time in reporting cases of diphtheria with symptoms of laryngeal obstruction has been frequently insisted upon in these reports.



### **Enteric or Typhoid Fever.**

17 cases were admitted and there were two deaths. Nearly all the cases were part of an outbreak which occurred in the last quarter of the year and in which the infection was traced to milk. (See Part 2 of Report). Typhoid Fever has, happily, under normal circumstances become extremely rare in Leicester for many years past.

### **Measles.**

Owing to the almost complete freedom of the town from measles during 1919 only seven cases called for admission to hospital, and all recovered. Institutional treatment of this disease is in some cases urgently necessary in the interest of the patient, and in the future we must be prepared to admit more cases than we have hitherto done.

### **Cerebro-Spinal Fever.**

At one time cases of cerebro-spinal fever were usually treated in general hospitals, but with the discovery of the fact that the disease was of germ origin it was regarded as possibly infectious in its nature, and was therefore considered more suitable for treatment in isolation hospitals. As a matter of fact, however, the disease does not appear to spread from the sick to those in contact with them, and few if any instances have ever been recorded of the disease spreading in general hospitals either to the nurses or to the other patients. The disease is a very serious one and the case-mortality is very high. Out of 12 cases admitted during the year no less than 8 proved fatal.

These cases make very special demands upon the time and attention of both nurses and doctors. Indeed, one single case of cerebro-spinal fever is as much trouble as a dozen ordinary cases, such as scarlet fever, or uncomplicated diphtheria.

### **Influenza.**

74 cases of influenza were admitted in the early part of the year during the third or spring wave of the great epidemic. There were 20 deaths. The epidemic was reported upon so

fully in the last report—including the cases admitted in 1919—that it is unnecessary to comment further, beyond emphasising once again the great value to the city of the Groby Road Institution during the unparalleled emergency caused by that terrible visitation.

### **Military Cases.**

With the termination of the Great War the need for hospital beds quickly diminished and one after another auxiliary hospitals throughout the country were closed or allowed to revert to their ordinary purposes. It was not until March of the year under review, however, that the last convalescent sick and wounded soldiers were removed from Groby Road. The military authorities continued to retain and pay for a number of beds in view of possible outbreaks of infectious disease, but after a time this was discontinued on the understanding that casual cases of infectious disease which might occur amongst soldiers would still be admitted. The charge for admission of such casual cases was, however, increased in view of the increasing cost of nearly all hospital maintenance expenses.

### **Sick Infants.**

As already mentioned, a new departure was made at the end of the year under review by the decision to set aside a small block, No. 6, for the reception of sick and wasting infants, hitherto treated by a Voluntary Society, at the Babies' Nursing Home, Victoria Road.

The reasons that led up to this decision have been referred to in Part 3. Several of the Staff at Victoria Road came with the infants. The accommodation provided has proved very suitable, and no serious difficulty has so far been experienced. Without doubt there are a considerable number of sick and wasting infants whose cases, for various reasons, urgently call for institutional treatment. It may be that the mother is ill, or dead, or about to be confined. Or there may be no father and the mother is obliged to go to work. The Day Nurseries can only admit healthy infants and then only for the day.

A charge of 7/- per week is made, but in really necessitous cases this is often reduced, or even remitted altogether.

In many of the cases admitted marked improvement is quickly manifested. The results will be dealt with more fully in the next report.

### **Tuberculosis.**

The classification of tuberculosis cases has become somewhat complicated. Hitherto we have had some seven categories as shown in Table A. Now the group "Insured Patients" has to be divided. All men who have been in the Army, and in whom the disease is attributable to their service, are now paid for by the Pensions Board and so have to be classed separately. Of course the distinction is only on paper. The treatment is the same for all categories, depending only upon the patient's condition as regards the disease.

The tuberculosis cases constitute numerically the most important part of the work of the institution. The number of patient-days is a better index of the number of patients under treatment than the actual number admitted, because tuberculosis patients usually remain at the institution for long periods. In Table B are shown the total patient-days for each disease. It will be seen that the patient-days for all infectious diseases put together was only 27,858, whereas the corresponding figure for tuberculosis was 55,906, or twice as many.

### **Physical Exercises.**

Great importance is attached to systematic breathing and physical exercises in the treatment of pulmonary tuberculosis. For a number of years a Physical Drill Instructor has been appointed and attends twice a week. Mr. J. Welch held the position until he joined the Army. His place was then taken by Mr. A. Freer, Superintendent of Cossington Street Public Baths. Mr. Welch returned for a time after the war but has since resigned and Mr. Freer has again been appointed.

The success of this work depends very largely upon the Instructor. It depends not only upon the nature of the exercises taught but upon the enthusiasm and perseverance he can inspire in the patients.

### **Proposed Training Section.**

Reference may be made here to the Training Section for Ex-Service men which the Ministry of Health are about to provide at the Leicester Sanatorium in common with other similar institutions. The proposal which has been agreed to is that the Training Section shall provide for 20 patients, not only from Leicester but from other places, though Leicester men will have first claim.

The buildings to be erected will consist of Army huts which will be adapted to provide workshops, cubicles for sleeping purposes, and mess and recreation rooms. The Ministry of Health will pay for the whole cost, including erection and maintenance, for a period of five years, at the end of which time, or sooner by arrangement, the local authority will have the option of taking over the buildings at two-thirds their then value. Failing this the Ministry will remove them and make good the site.

It is intended that only men whose condition fits them to do a definite number of hours work a day will be admitted for regular training, though if there is room other patients will be allowed to use the workshops. The trades to be taught have not yet been decided upon. It is contemplated arranging for different Sanatoriums to provide training in different trades and industries so that ex-service men can be offered a selection. Before deciding it is proposed, we understand, to consult the representatives of labour so as to secure as far as possible, the co-operation of the trades concerned.

### **Medical Staff.**

During the first part of the year, Dr. Bhandari, an Indian medical practitioner, who was highly recommended and proved an efficient medical officer, carried on the work for a time single-handed. He returned to India, as soon as travelling facilities were available, and was succeeded by Dr. H. M. Jackson and Dr. Olive Blackham. These also proved efficient officers. Dr. Jackson obtained a better post as Resident Medical Officer at Hull Fever Hospital, and Dr. Blackham

unfortunately contracted diphtheria. She went away for a change when convalescent and elected not to return. They have been succeeded by Dr. Alan Sontar and Dr. Carrie Sims, both of whom are still with us.

### **Nursing Staff.**

As regards the health of the nursing and domestic staff, this has been good, very few contracting any infectious disease.

Nurse Ellison, one of the older members of the nursing staff, became too infirm for hospital duty and, after prolonged leave of absence, is at present being treated as a patient in the institution.

### **Ambulance Driver.**

Charles Brett, who has held the position of ambulance driver for many years, after being in failing health for some time, finally had a complete break-down (May, 1920) and has had to give up work altogether.

### **Motor Ambulances.**

His illness coincides with the decision to substitute motor ambulances for the old horse-drawn vehicles hitherto used, and two good Siddeley-Deasey chassis were obtained and ambulance bodies are now being built. This very necessary change was long over-due and would have been made before but for the war.

### **Hospital Laboratory.**

During the year the following specimens have been examined by the medical officers:—

Diphtheria	...	...	...	359
Typhoid	...	...	...	20
Tuberculosis	...	...	...	36
Cerebro-Spinal Fluid	...	...		13
Total				428

Of these, 133 were sent by medical practitioners in the city ; the others were from patients in the institution. In addition a large number of specimens from the city were sent to the Pathologist at the Royal Infirmary during the time that there was only one medical officer at the institution.

**Chaplains.**

The Rev. F. O. Scott (C. of E.) and Rev. Hughes (Non-conformist) attend the institution every week. I believe their ministrations are much appreciated by many of the patients and staff.

TABLE A.

## Number of Patients Admitted, Discharged and Died during 1919.

DISEASE.	Remaining 31st December, 1918.	Admitted during Year.	Discharged during Year.	Died during Year.	Remaining 31st December, 1919.
Scarlet Fever ... ..	54	417	402	3	66
Diphtheria ... ..	10	269	215	24	40
Enteric Fever ... ..	0	17	2	2	13
Measles ... ..	0	7	7	0	0
Cerebro-Spinal Fever ... ..	0	12	4	8	0
Influenza ... ..	9	74	63	20	0
Other Infectious Diseases ... ..	1	16	15	1	1
Military Cases ... ..	87	45	127	5	0
Sick Infants ... ..	0	16	0	2	14
Tuberculosis:					
Insured ... ..	23	175	138	18	42
"Class X" * ... ..	4	2	4	0	2
"Class Y" † ... ..	0	22	9	0	13
Non-insured ... ..	3	64	47	7	13
Children ... ..	24	152	132	7	37
Poor-law adults ... ..	27	25	22	19	11
Poor-law children ... ..	8	2	2	0	8
Discharged Soldiers ... ..	19	172	145	11	35
TOTAL ... ..	269	1487	1334	127	295

\* "Class X" implies insured patients for whom the Sanitary Committee and not the Insurance Committee are responsible.

† "Class Y" implies insured patients not belonging to Leicester, chiefly patients from County of Leicester.

**TABLE B.**  
**Patient Days**

			For 12 months ending Dec. 31st, 1919.	For 12 months ending March 31st, 1920.
Scarlet Fever ...	...	...	16309	18953
Diphtheria ...	...	...	8682	11860
Enteric Fever ...	...	...	468	1067
Measles ...	...	...	147	164
Influenza ...	...	...	1707	451
Cerebro-spinal Fever ...	...	...	271	368
Other Infectious Diseases		...	274	401
Military Case ...	...	...	5192	951
Tuberculosis :—				
Insured ...	...	...	16693	18130
Discharged Soldiers . .		...	10912	11294
Non-insured	...	...	4349	4787
Children ...	...	...	14212	14415
Poor Law Adults	...	...	6026	4633
“ .. Children	...	...	2902	2849
“ Class Y ” †	...	...	812	2111
Sick Infants	...	...	318	1404
			89274	93838

**SUMMARY.**

Infectious Diseases	...	...	27858	33264
Tuberculosis	...	...	55906	58219
Military Cases	...	...	5192	951
Sick Infants	...	...	318	1404
Total	...	...	89274	93838

† Insured, but not belonging to Leicester, chiefly County patients.



**TABLE C. City of Leicester.  
ISOLATION HOSPITAL AND SANATORIUM.**

**Receipts and Payments during two years ending  
31st March, 1920.**

PAYMENTS.	Year 1918-19.			Year 1919-20.		
	£	s.	d.	£	s.	d.
Salaries and Wages ...	4513	6	5	4702	10	1
Meat ... ..	1973	16	5	1664	17	3
Other Provisions ... ..	5210	5	0	5557	19	0
Furniture, Fittings and Domestic Utensils ...	204	12	1	385	8	14
Bedclothing, Towelling, &c. ...	225	12	4	378	12	1
Fuel, Light and Water ...	3067	2	0	3425	13	1
Rates, Insurance and Telephone	451	8	9	632	2	3
Alterations and Repairs ...	586	7	5	1280	2	1
Horsehire, Horsekeep and Ambulance ... ..	229	1	1	1382	13	2
Drugs and Medical Appliances...	746	2	5	1170	4	9
Advertising, Printing and Stationery ... ..	114	3	8	115	1	3
Grounds; Gardeners' Wages, Materials, &c. ... ..	689	17	8	733	16	6
Cleaning Materials ... ..	289	16	6	300	6	9
Clothing and other expenses (Poor Law patients) ...	127	9	2	106	1	4
Sundries ... ..	246	11	7	369	18	8
Total Payments ...	18675	12	6	22202	10	5
Less Sale of Produce, &c. ...				435	15	6
Actual cost ... ..				21766	14	11
RECEIPTS.	Year 1918-19.			Year 1919-20.		
	£	s.	d.	£	s.	d.
Maintenance of Consumptive Patients (Leicester Board of Guardians) ... ..	2327	15	8	1606	8	0
Ditto (Leicestershire County Council) ... ..				221	8	3
Ditto (Insurance Committees) ...	2542	1	1	1358	13	1
Maintenance of Babies ... ..				56	2	0
Other Maintenance Receipts ...	101	2	6	394	15	6
Pumping Cemetery Sewage ...	75	0	0	75	0	0
Sale of Pigs, Hay, &c. ... ..	242	0	8	360	1	0
Miscellaneous Receipts ... ..	53	0	3	111	2	7
Government Grant towards cost of Treatment of Tuberculosis	3358	0	0	2107	0	0
Treatment of Soldiers ... ..	6608	13	9	844	17	0
Total Receipts ...	15307	13	11	10135	7	5
Net cost (excluding Loan Charges) ... ..	£ 3367	18	7	12,067	3	0
No. of Patient days ... ..	107,071			93,838		

W. PENN-LEWIS,

*City Treasurer.*

April, 1920.



## APPENDIX III.

## REPORT OF PUBLIC ANALYST

For the Year 1919.

CORPORATION BUILDINGS,  
HORSEFAIR STREET,  
LEICESTER.

THE CHAIRMAN AND MEMBERS OF THE SANITARY COMMITTEE,  
GENTLEMEN,

I have to report that during the year 1919, 295 samples, taken under the provisions of the "Sale of Food and Drugs Acts," were submitted for analysis.

It is remarkable that out of 198 samples of milk only one was reported as containing added water, and two samples were deficient in fat. 78 samples of milk were tested for preservatives but none were found.

A wider range of samples is shown by the inclusion of aerated waters, chocolates, preserved eggs, and jam, and further developments in this direction are desirable; as also in the case of drugs.

Pending a return to normal conditions, neither butter nor alcoholic liquors have been analysed.

Samples of bread and flour examined have been quite satisfactory.

There is no doubt that the operation of the "Sale of Food and Drugs Acts," tends not only to prevent adulteration, but also ensures that the purchaser obtains food of the nature and quality desired.

I am,

Yours obediently,

S. F. BURFORD.

April 8th, 1920.

**TABLE A.**  
**Summary showing Samples taken and submitted for Analysis during 1919.**

Nature of Samples.	1st Quarter.		2nd Quarter.		3rd Quarter.		4th Quarter.		Total for Year.	
	Samples taken.	Found Adulterated.	Samples taken.	Found Adulterated.	Samples taken.	Found Adulterated.	Samples taken.	Found Adulterated.	Samples taken.*	Found Adulterated.
Milk (New)	60	1	60	2	36	...	42	...	198	3
Coffee	6	...	...	...	6	...	...	...	12	...
Cocoa	6	...	...	...	...	...	...	...	6	...
Flour	3	...	...	...	...	...	6	...	9	...
Bread	3	...	...	...	...	...	6	...	9	...
Mustard	6	...	6	...	...	...	...	...	12	...
Lard	...	...	12	...	...	...	...	...	12	...
Baking Powder	...	...	6	...	...	...	...	...	6	...
Chocolate	...	...	12	...	...	...	...	...	12	...
Sal Volatile	...	...	...	...	...	...	4	...	4	...
Aerated Waters	...	...	...	...	...	...	3	...	3	...
Preserved Eggs	...	...	...	...	...	...	3	...	3	...
Jam	...	...	...	...	...	...	3	...	3	...
Cinnamon & Quinine Tablets	6	...	...	...	...	...	...	...	6	...
Total	90	1	96	2	42	...	67	...	295	3

\* Of the total samples, 12 samples of coffee, 6 of cocoa, 9 of flour, 9 of bread, 12 of mustard, 12 of lard, 6 of baking powder, 12 of chocolate, 4 of sal volatile, 3 of aerated waters, 3 of preserved eggs and 3 of jam were taken informally.

**TABLE B.**  
**Particulars of Adulterated Samples in 1919.**

No. of Sample.	Nature of Sample.	Nature and Amount of Adulteration.	Action Taken and Remarks.
69	New Milk	... 26 per cent. of added water	... Cautioned by Committee.
93	" "	... 11.34 per cent. deficient in fat	... " " "
118	" "	... 20 " " "	... Prosecuted. Fined £1.



## APPENDIX IV.

**Summary of Report of Chief Inspector,**

FRANCIS BRALEY.

**STATEMENT A.****Showing the work done by the Sanitary Staff during the year 1919.**

	No. of Visits.
Systematic House to House Inspection ...	6,687
Investigations of Complaints ...	25,293
Visits to ascertain the progress of Sanitary and Informal Orders ...	19,598
Visits in connection with Infectious Diseases ..	4,618
Visits to Common Lodging Houses ...	502
Visits to Bakehouses ...	744
Visits to Canal Boats ...	53
Visits to Workshops ...	366
Visits to Factories ...	123
Visits to Dairies and Milk Shops ...	1,017
Visits to Cowsheds ...	117
Visits by Meat Inspectors ...	15,962
Other visits ...	433
	<u>75,513</u>
Samples of Food, &c., purchased for Analysis under Adulteration Acts ...	298
Observations for the purpose of Smoke Prevention ...	560
Stacks reported for Smoke Nuisance ...	—
Filthy Houses reported to Medical Officer of Health ...	139
Dilapidated Houses „ „ „ ...	23
Prosecutions under the Public Health and Local Acts ...	2
Letters received ...	1,444
Letters sent out from the Offices ...	6,219
Drains Tested (Smoke and Fluid) ...	495

Orders issued :— Formal 375, Informal 4,535.

In connection with the 6,687 houses inspected, 526 Informal notices were served to cleanse filthy houses and 169 Formals (on certificate of M.O.H.).

## STATEMENT B.

In connection with the Inspection of Factories and Workshops,  
 89 Sanitary defects were found, and Formal and Informal  
 Notices served.

## STATEMENT C.

The quantity of Meat, &c., condemned by the Inspectors of  
 Foods during the year 1919 was as follows:—

						Tons.	Cwts.	Qrs.	Lbs.
Meat	...	...	...	...	...	80	17	—	9
Fish	...	...	...	...	...	47	2	3	5
Fruit	...	...	...	...	...	8	4	1	26
Vegetables	...	...	...	...	.	3	14	3	6

						No.
Rabbits	...	...	...	...	...	7,346
Preserved Foods	...	...	...	...	...	9,680
Poultry	...	...	...	..	...	100
Eggs	...	...	...	...	...	9,112
Game	...	...	...	...	...	2,104
Oysters	...	...	...	...	...	1,050
Other Foods	...	...	..	...	...	208



## APPENDIX V.

# SUMMARY OF REPORT OF INSPECTORS OF FOOD.

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The amount of food voluntarily surrendered or seized is given in Statement C in the Chief Inspector's Report.

The number of carcasses destroyed during the year for tuberculosis was as follows:—

Whole carcasses—Cows	...	...	114
.. .. Heifers	...	...	4
.. .. Bullocks	...	...	3
.. .. Bull	...	...	1
.. .. Calves	...	...	3
.. .. Pigs	...	...	4
.. .. Sheep	...	...	1
			<hr/>
Total	...	...	130
			<hr/>
Forequarters of Cows	...	...	9

In addition to the above, 3 tons 19 cwts. of offals were destroyed on account of localised tuberculosis.

Leicester is known as No. 5 area, which includes Leicester, Rutland, and parts of Northampton, Lincoln, Nottingham and Derby. The Government authorities have taken several of the Corporation slaughterhouses at the Cattle Market and have appointed as their agents The Leicester Dairy Farmers' Co-operative Union. Their business is to slaughter all animals that are to be sold on a dead weight basis. Any casualty beasts from the above area may only be slaughtered at the Government slaughterhouses.

The number of carcasses condemned for tuberculosis is more than three times the quantity condemned last year. This is accounted for by the fact that during the whole year under

notice the foregoing rule was in force, whereas in the previous year it was only in vogue for three months.

During the year, condemned meat has been utilised for the purpose of pig and poultry food.

There were three consignments of gooseberries reported to the Board of Agriculture for American Mildew.

We beg to remain,

Your obedient servants,

MARTIN TYLDESLEY,

FREDERICK SOWERBUTTS,

Inspectors of Food.

## APPENDIX VI.

## REFUSE DISPOSAL DEPARTMENT.

## SUMMARY OF REPORT

for 1919

Of the Superintendent, Mr. F. W. BROOKMAN.

The Plant consists of 61 carts, 45 railway wagons, 3 slop carts, and 1 tip wagon.

The number of men employed is 128, with 45 horses.

## AMOUNT OF REFUSE COLLECTED.

	Tons.
From Portable Ash-bins (56,135) ... ..	38,650
From Ash-pits ... ..	3,245
Trade Refuse ... ..	2,956
Various (Specials) ... ..	67
From Knighton District (House Refuse) ...	2,242
Total Tons ... ..	47,160

Of the above quantity, 7,075 tons were taken to Manure Wharves and Tips; the remainder was burnt at the Destructors.

The amount of stable manure collected was 5,794 cart loads, and from the Beast Market 350—total, 6,144.

The sales of manure during 1919 were as follows:—422 railway wagon loads, weight 3,108 tons, £422; 115 cart loads, 115 tons, £14 3s. 0d.—total, 3,223 tons, £436 3s. 0d.

## TRADE REFUSE.

5,247½ loads of trade refuse (weight, 2,956 tons) were removed and taken to the Destructors, the payment received amounting to £1,123 6s. 3d. A charge of 2s. 6d. per load, which was increased to 5s. per load on April 1st, was made for collecting and burning trade refuse, or 2s. per ton for burning only.

2,775 dilapidated dustbins were reported; these are renewed by the landlord.

### "TATTING."

The saleable articles picked out of the house refuse are sold, and one-half of the proceeds is divided amongst the men. The amount received by the men averaged nearly 1s. 3½d. per week per man.

Value of Detinned and Galvanized Scrap, etc., sold:—Detinned scrap, £392 12s. 9d.; galvanized scrap, £117 16s. 4d.; rags, bones, bottles, etc., £985 8s. 5d.; also paper, £92 6s. 5d.—total, £1,588 3s. 11d.

### HOSPITAL SATURDAY SOCIETY.

All workers in this department subscribe twopence weekly, the total amount raised last year being £39.

### DESTRUCTORS.

#### AMOUNT OF REFUSE RECEIVED AT THE DESTRUCTORS.

	Nedham Street.	Mill Lane.	Lero.	West Humber- stone.	Total.
	Tons.	Tons.	Tons.	Tons.	Tons.
Delivered by Corpora- tion           ...       ...	9,067	10,094	10,661	10,296	40,127
Delivered by Trades- men           ...       ..	102	601	371	65	1,139
Total for year       ...	9,178	10,695	11,032	10,361	41,266

F. W. BROOKMAN,  
Superintendent.

## APPENDIX VII.

## STREET CLEANSING DEPARTMENT

My Annual Report for the year 1919 is as follows :

**STREET CLEANSING.**

The particulars of the streets swept in normal times are :

	Hand-swept.	Machine-swept.
Once per week ... ..	37 miles	20½ miles
Twice .. ..	7½ ..	22 ..
Three times per week ... ..	½ ..	10 ..
Four .. ..	¼ ..	3¾ ..
Six .. ..	½ ..	10 ..
	45¾ miles	66½ miles

The actual length of the roads to be swept is 112 miles.

**STAFF AND WORKING HOURS.**

At the present time the staff numbers 110—including four temporary men—as against 126 in pre-war days ; a reduction of 16.

The hours worked each week are now 47, as against 54 previously ; the wages paid to all able-bodied men being 28s. per week, plus 35s. war bonus.

We are still without orderly boys, and the work usually carried out by them is now being done regularly by four young men with hand-trucks.

**STREET CULLIES.**

The number of gullies emptied during the year was 184,250, compared with 101,953 in the previous year. An effort is now being made to empty all gullies weekly.

## **COURTS AND BACKWAYS.**

208 courts and alleys are cleansed regularly each week.

## **SNOW REMOVAL.**

Snow fell on seven occasions during the year, including a very heavy fall in the early part of November. The total number of loads removed was 2,174, as compared with 1,658 loads during the previous year. The cost of removal in excess of our own staff was £277 17s. 6d.

## **STREET WATERING.**

Six hired horses and six of our own were engaged in this work, mostly sprinkling the streets directly in front of the sweeping gangs. The cost of hiring horses is now 30s. per day, as compared with 10s. per day in 1914.

The work carried out by the Tramways Department's electric watering tanks was as follows:—Loads spread, 1,979; quantity in gallons, 3,033,807; Cost, £445 5s. 6d. The charge made for spreading water by these tanks is now 4s. 6d. per load, compared with 2s. 4d. per load before the war.

I am convinced that this work could be done much better and far cheaper than either of the above methods if motors were employed for the purpose.

## **SUMMARY OF LOADS OF MATERIALS HANDLED.**

Sweepings collected (dry), 7,506; sludge, 4,574. Manure collected, 295. Market Refuse, 565. Manure re-carted to gardens, 385. Sweepings (ditto), 1,164. Snow removed, 2,174. Gravel spread, 908. Water spread, 8,652. Stable Refuse, 312. Miscellaneous, 430. Total, 26,965.

H. F. WIGFIELD,  
Superintendent.

APPENDIX VIII.

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STATISTICAL TABLES.

**TABLE 1.**  
**MUNICIPAL WARDS. VITAL STATISTICS, 1919.**

	WARD. (1)	No. of Inhabited Tenements July, 1919. (2)	Estimated Population, (3)	Births. (4)	Deaths. (5)	Deaths under 1 year. (6)
1.	St. Martin's	576	2586	34	39	4
2.	Newton ...	2171	9118	195	142	18
3.	St. Margaret's	3142	13416	244	204	36
4.	Wyggoston	3571	15391	377	262	54
5.	Latimer ...	3815	18301	343	242	36
6.	Charnwood	2008	8674	115	110	9
7.	Wycliffe ...	2796	11028	218	170	13
8.	De Montfort	1688	7427	61	120	4
9.	The Castle	3170	13757	272	188	20
10.	Westcotes ...	6025	25425	280	244	16
11.	The Abbey	4625	21552	352	239	33
12.	Bolgrave ...	3907	16936	254	208	24
13.	West Humberstone	4306	19523	315	232	37
14.	Spinney Hill	5721	25286	340	310	30
15.	Knighton ...	4127	17333	190	170	10
16.	Aylestone ...	2658	12439	184	146	26



**TABLE 2.**  
**MUNICIPAL WARDS. VITAL STATISTICS, 1919.**

WARD.	Birth-rate.	Death-rate.	Infant Mortality.	Zymotic rate.	Diphtheria rate.	Phthisis rate.	Average phthisis rate last 10 years.
1. St. Martin's	13.1	15.0	117	1.5	.3	1.1	1.00
2. Newton	21.3	15.5	92	1.6	0.0	1.5	1.82
3. St. Margaret's	18.1	15.2	147	2.3	.3	1.6	1.78
4. Wyggeston	24.4	17.0	143	2.0	.2	1.4	1.83
5. Latimer	18.7	13.2	104	1.5	0.0	1.1	1.50
6. Charnwood	13.2	12.6	78	1.6	.1	.9	1.44
7. Wycliffe	19.7	15.4	59	2.0	0.0	1.7	1.16
8. De Montfort	8.2	16.1	65	1.7	0.0	1.6	.71
9. The Castle	19.7	13.6	73	1.2	.2	.9	1.31
10. Westcotes	11.0	9.5	57	1.3	0.0	.7	1.01
11. The Abbey	16.3	11.0	93	1.5	0.0	1.0	1.10
12. Belgrave	14.9	12.2	94	2.0	.1	1.0	1.02
13. West Humberstone	16.1	11.8	117	1.5	.1	1.4	1.57
14. Spinney Hill	13.4	12.2	88	1.6	0.0	.9	.95
15. Knighton	10.9	9.8	52	1.8	0.0	.4	.52
16. Aylestone	14.7	11.7	141	0.7	0.0	.7	.90

**TABLE 3. MUNICIPAL WARDS.****Average Rates for Five Years, 1915-1919.**

WARD.		Average Rates.		
		Death-rate.	Birth-rate.	Infant Mortality.
(1)		(2)	(3)	(4)
1. St. Martin's ...	...	16·0	16·7	183
2. Newton ...	...	17·9	22·5	152
3. St. Margaret's ...	...	15·7	19·6	141
4. Wyggeston ...	...	20·7	24·1	172
5. Latimer ...	..	15·0	21·2	117
6. Charnwood ...	...	15·3	15·3	123
7. Wycliffe ...	...	16·7	17·7	75
8. De Montfort...	...	13·3	9·4	140
9. The Castle ...	..	14·5	19·6	86
10. Westcotes ...	...	10·4	12·2	83
11. The Abbey ...	...	11·5	17·9	90
12. Belgrave ...	...	12·9	16·5	103
13. West Humberstone ...	...	13·5	18·8	95
14. Spinney Hill...	...	10·9	13·7	83
15. Knighton ...	...	9·5	12·2	48
16. Aylestone ...	...	11·7	15·8	109
Whole Borough ...	...	13·06	15·34	98·0

**TABLE 4.**  
**Deaths in each Ward from all causes in 1919.**

WARD.	0 to 1 year.			2 to 60.			Total all ages.												
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
No. 1 St. Martin's	1	3	10	22	39	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 2 Newton	1	11	56	54	142	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 3 St. Margaret's	36	19	83	66	204	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 4 Wyggeston	54	21	82	99	262	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 5 Latimer	36	23	95	82	212	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 6 Chanwood	9	2	44	49	110	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 7 Wyeliffe	13	2	64	85	170	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 8 De Montfort	1	7	47	62	120	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 9 The Castle	20	8	66	94	188	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 10 Westcotes	16	5	110	113	244	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 11 The Abbey	33	7	109	90	239	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 12 Belgrave	24	15	81	85	208	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 13 West Humberstone	37	16	91	88	232	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 14 Spinney Hall	30	13	145	122	310	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 15 Knighton	10	6	71	83	170	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" 16 Aylestone	26	3	45	72	146	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Infirmary	15	15	137	50	217	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Union Workhouse	...	...	...	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Borough Asylum	...	...	26	27	53	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Isolation Hospital	4	11	91	7	113	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Poor Law Infirmary	...	3	63	125	252	1	1	1	1	1	1	1	1	1	1	1	1	1	1

Deaths in Institutions have been subtracted from the Wards in which the Institutions are situated; and (except in the case of the Workhouse and Asylum) have been distributed to the Wards to which they belong. Deaths of persons transferred from the Workhouse to the Poor Law Infirmary, however, have not been distributed, as the home addresses of such persons are not obtainable.

**TABLE 5.**  
**Showing Number of Deaths from Tubercular Diseases**  
**in Leicester in past years.**

Year.	Phthisis.*		Other Tuberculous Diseases.		Total Tuberculous Deaths.	
	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1899	202	98	129	63	331	161
1900	230	110	144	69	374	179
1901	271	127	80	38	351	165
1902†	272	127	86	40	358	168
1903	266	123	111	51	377	175
1904	353	163	96	44	449	207
1905	288	132	87	40	375	171
1906	339	154	71	32	410	187
1907	275	124	99	44	374	169
1908	287	128	104	46	391	175
1909	290	129	82	36	372	166
1910	281	124	77	34	358	158
1911	288	126	66	28	354	155
1912	284	123	89	38	373	162
1913	301	130	82	35	383	165
1914	273	117	88	37	361	155
1915	325	143	76	33	401	177
1916	306	135	67	29	373	165
1917	343	157	78	35	421	193
1918	316	145	82	37	398	182
1919	264	111	62	26	326	138

\* In comparing the Phthisis figures for the years prior to 1901 with the figures for later years, it will be noticed that an apparent increase in the phthisis rate has occurred. It will also be seen, however, that there has been a proportionate decrease in the rate for "other tubercular diseases." The explanation is that in 1901 a different method of classification was adopted whereby a certain number of cases which had hitherto been classified as other tubercular diseases were transferred to the heading of "phthisis."

† The rates for the years 1902-10 have been revised in the light of the 1911 Census.

TABLE 6.

**Age and Sex Distribution of Deaths from Phthisis in 1919.**

Age Period.	Males.	Females.	Total.
0 to 5 ... ..	1	...	1
5 .. 10 ... ..	2	..	2
10 .. 20 ... ..	17	23	40
20 .. 30 ... ..	25	43	68
30 .. 40 ... ..	29	31	60
40 .. 50 ... ..	32	16	48
50 .. 60 ... ..	20	8	28
60 .. 70 ... ..	11	3	14
70 .. 80 ... ..	1	2	3
Over 80 ... ..	...	...	...
Total ... ..	138	126	264

**Occupations of Persons Dying from Phthisis in 1919.**

	M.	F.		M.	F.
SHOE TRADE:					
Finishers ... ..	13	...	Army Pensioners ...	3	..
Clickers ... ..	11	...	Butcher .. ..	1	...
Riveters ... ..	3	...	Porters ... ..	2	...
Pressmen ... ..	3	..	Teachers ... ..	1	2
Machinists ... ..	1	6	House Agent ... ..	1	...
Various ... ..	12	7	Postman ... ..	1	...
Total in Shoes ...	43	13	Pianist ... ..	...	1
Hosiery Trade* ...	8	24	Baker ... ..	1	...
Labourers ... ..	9	...	Grocer ... ..	1	...
Clerks ... ..	4	4	Printers .. ..	3	...
Tailoring Trade ...	2	2	Various ... ..	28	6
Vamnen .. ..	3	...	Occupations not stated		
Elastic Web Weavers	1	...	(includes Married		
Basket Makers ...	2	...	Women, Widows,		
Laundress ... ..	...	1	Children, and		
Commercial Travellers	2	...	Persons of no		
Hairdressers ... ..	2	...	occupation) ..	20	73
			Total ... ..	138	126

\* A large number of *married* women are engaged in the Hosiery Trade, but these are not included for in the case of deaths of married women and widows, only the husband's occupation is registered.

TABLE 7.

Showing the number of Notification Certificates for and number of Deaths from the Principal Zymotic Diseases for the seven years, 1913-1919.

DISEASE.	1913.		1914.		1915.		1916.		1917.		1918.		1919.	
	Notifica- tions.	Deaths.	Notifica- tions.	Deaths.	Notifica- tions.	Deaths.	Notifica- tions.	Deaths.	Notifica- tions.	Deaths.	Notifica- tions.	Deaths.	Notifica- tions.	Deaths.
Small Pox ...	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	548	7	577	5	332	2	647	2	573	3	583	5	579	2
Diphtheria ...	185	19	136	19	156	27	115	11	128	18	154	15	272	30
Enteric Fever	21	1	18	6	13	2	9	2	3	2	34	4	30	3
Erysipelas ...	192	5	258	9	338	18	154	7	114	5	101	1	131	6
Puerperal Fever ...	18	2	11	4	25	12	16	5	4	0	6	6	11	4
Phthisis ...	872	301	730	273	901	325	730	306	655	343	746	316	658	264
Other forms	329	82	138	88	159	76	134	67	98	78	82	82	47	62
Ophthalmia	15	0	55	0	61	0	67	0	66	0	51	0	101	0
Cerebro-Spinal Fever	...	1	...	0	5	2	7	7	4	2	2	1	4	8
Acute Poliomyelitis	..	.0	...	0	4	2	3	1	5	1	3	1	3	2
Measles ...	...	34	...	97	...	73	3807	140	4572	98	1686	59	262	1
TOTALS ...	2181	449	1923	501	1994	539	5689	548	6232	550	3448	490	2098	382

(TABLE 8. L.G.B. Table 1.)

## Vital Statistics of whole District during 1919 and previous years. Borough of Leicester.

YEAR.	Population estimated to middle of each year, revised in light of 1911 Census.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NET DEATHS BELONGING TO THE DISTRICT.		
		Un-corrected Number.	Nett. Number.	Number.	Rate.	Of Non-residents registered in the District.	Of Residents not registered in the District.	Under 1 Year of Age.	Rate per 1000 Net Births.	At all Ages.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1914	232,664	5091	5144	2210	2996	145	431	617	1199	3282
1915	232,664	4832	4851	2084	3363	195	217	596	1228	3385
1916	225,907		4684	2073	3110	176	159	491	1048	3093
1917	217,537	3710	3688	1695	3020	234	161	388	1050	2948
1918	217,537	3286	3246	1492	3981	277	179	351	1081	3883
1919	236,059	3811	3774	1534	3098	241	226	376	980	3083

Total population at all ages

...

236,059

Area of District in acres (exclusive of area covered by water)

Number of inhabited houses

...

54,306

...

...

...

8.582

Average number of persons per house

...

4.41

NOTE.—This Table has been filled in in accordance with the instructions given on the form supplied by the Local Government Board.



TABLE 9. (L.G.B. Table IV.) Borough of Leicester.

## INFANT MORTALITY DURING THE YEAR 1919.

Nett Deaths from stated causes at various Ages under  
1 Year of Age.

CAUSE OF DEATH.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths Under 1 Year
All Causes Certified.	88	27	24	17	156	65	52	48	49	370
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...
Chicken-pox ... ..	...	...	...	...	...	...	...	...	...	...
Measles ... ..	...	...	...	...	...	...	...	...	1	1
Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...
Whooping-cough ... ..	...	...	...	...	...	1	1	3	2	7
Diphtheria and Croup	...	...	...	...	...	...	...	1	...	1
Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	2	1	...	3
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	1	...	...	4
Meningitis ( <i>not Tuberculous</i> )	...	...	1	...	1	...	...	...	1	2
Convulsions ... ..	7	1	1	...	9	3	1	4	1	21
Laryngitis ... ..	...	...	...	...	...	...	...	...	...	...
Bronchitis ... ..	...	2	1	1	4	7	7	9	9	36
Pneumonia (all forms)	1	...	...	...	1	3	7	11	11	33
Diarrhoea ... ..	...	...	...	1	1	9	2	4	1	17
Enteritis ... ..	1	...	...	2	3	10	5	2	4	24
Gastritis ... ..	...	1	...	...	1	5	...	...	3	9
Syphilis ... ..	...	...	...	...	...	1	...	1	1	3
Rickets ... ..	...	...	...	...	...	...	...	...	...	...
Suffocation (overlying)	1	...	1	1	3	2	...	...	...	5
Injury at Birth ... ..	1	...	...	...	1	...	...	...	...	1
Atelectasis ... ..	2	2	...	...	4	...	...	...	...	4
Congenital Malformations	4	...	2	...	6	...	...	...	...	6
Premature Birth ... ..	14	5	6	2	57	6	1	...	...	64
Atrophy, Debility and Marasmus ... ..	20	11	9	9	49	13	4	3	3	72
Other Causes ... ..	7	5	3	1	16	5	15	9	12	57

Nett Births in the Year (legitimate, 3,532.  
(illegitimate, 242.

Nett Deaths in the Year of (legitimate infants, 317.  
(illegitimate infants, 53.



**TABLE 10. VENEREAL DISEASE.**

**Annual Statement showing services rendered at the Leicester Royal Infirmary during the Year ending on the 31st December, 1919.**

County or County Borough.	No. of Attendances at Out-Patient Clinic.		Aggregate No. of "In-Patient Days."		No. of Doses of Salvarsan Substitutes used in Treatment Centre.		No. of Examinations of Pathological Material made at Treatment Centre.			
	M.	F.	M.	F.	M.	F.	*S.	*G.	*W.	*O.
County ... ..	2466	784	436	456	521	539	37	457	333	51
	3250		892		1060		5	67	137	15
							1102			
County Borough...	6850	2603	709	699	798	765	87	1558	773	121
	9453		1408		1563		20	418	600	21
							3598			
Total ... ..	12703		2300		2623		4700			

\*S For detection of spirochetes. \*G—For detection of gonococci. \*W For Wassermann reaction. \*O Other tests.

TABLE 11.

Return relating to persons residing in the County or County Borough of Leicester who were treated during the Year ending on the 31st December, 1919.

Number of persons dealt with at or in connection with the out-patient Clinic for the first time and found to be:—	Males.		Females.	
	T.	C.	T.	C.
Suffering from syphilis ...	218	116	184	74
" " soft chancre ...	...	...	...	...
" " gonorrhoea ...	374	141	35	8
Not suffering from venereal disease ...	5	4	9	1
TOTAL	597	261	228	83
Total attendances of all persons at the out-patient Clinic who were:—				
Suffering from syphilis ...	2152	1040	1925	694
" " soft chancre ...	...	...	...	...
" " gonorrhoea ...	4693	1422	666	48
Not found to be suffering from venereal disease ...	5	4	12	2
TOTAL	6850	2466	2603	744
Aggregate number of "In-patient days" of treatment given to persons suffering from:—				
Syphilis ...	319	213	367	245
Gonorrhoea ...	356	200	332	211
S. and G. ...	32	13	...	...
Negative ...	2	10	...	...
TOTAL	709	436	699	456
Number of persons treated with Salvarsan substitutes ...	443		303	
Number of doses of Salvarsan substitutes given ...	2623			
Examinations of Pathological material:—				
Specimens from persons attending at the Treatment Centre which were examined at this Centre:—				
For detection of spirrochetes ...	T	Number.	C.	
" " gonococci ...	107	...	42	
" " Wassermann reaction ...	1976	...	521	
Others ...	1373	...	170	
TOTAL	142	...	66	
	3598	...	1102	

**TABLE 12.**  
**VENEREAL DISEASE.**

**Return relating to all persons who were treated at the Treatment Centre at the Leicester Royal Infirmary during the year ended the 31st December, 1919.**

	Syphilis.		Gonorrhoea.		Conditions other than Venereal.		Total.	
	Males.	Females	Males.	Females	Males.	Females	Males.	Females
1. Number of persons who on the 1st January, 1919, were under treatment or observation for ... ..	47	24	103	48	...	...	150	72
2. Number of persons dealt with during the year at the out-patient Clinic for the first time and found to be suffering from—								
Syphilis only ... ..	334	212					334	212
Gonorrhoea only ... ..	...	...	509	43			509	43
Syphilis and Gonorrhoea ... ..	...	23	...	23	...			16
Conditions other than Venereal ... ..	...			...	9	10	9	10
Total—Item 2 ... ..	334	235	509	66	9	10	852	311
Total—Items 1 and 2 ... ..	381	259	612	114	9	10	1002	383
3. —Number of persons who ceased to attend the out-patient Clinic								
(a) before completing a course of treatment for ... ..	44	18	142	40	...		186	58
(b) after completion of a course of treatment, but before final tests as to cure of ... ..	186	166	196	50	...	...	382	216
4.—Number of persons transferred to other treatment Centres after treatment for ... ..	4	12	6	7	...	...	10	19
5.—Number of persons discharged from the out-patient Clinic after completion of treatment and observation for ... ..	6	5	24	7	9		39	12
6.—Number of persons who, on the 1st January, 1920, were under treatment or observation for ... ..	141	57	211	18	...	3	355	75
Total—Items 3, 4, 5 and 6	381	258	612	122	9	3	1002	380
7. Total attendances of all persons at the out-patient Clinic who were suffering from ... ..	3192	2619	6109	754	9	14	9310	3387
8. Aggregate number of "In-patient days" of treatment given to persons who were suffering from ... ..	554	612	579	513	12		1145	1155
9. —Examinations of Pathological material:—								
Specimens which were examined at, and by the Medical Officer of, the Treatment Centre					For detection of			
			Spirochetes.	Gonococci.	Other Organisms.		For Wassermann Reaction.	
			149	2500	208		1843	

TABLE 13.

**Annual Return relating to persons discharged from the Leicester Royal Infirmary during the year ending on the 31st December, 1919.**

Return of persons who were discharged after the *completion\** of treatment during the year ending 31st December, and who resided in the County or County Borough of Leicester.

	SYPHILIS		SOFT CHANCER		GONORRHOEA		TOTAL	
	Males	Females	Males	Females	Males	Females	Males	Females
1 Number of persons who were discharged as above ...	6	5	...	...	24	7	30	12
+ 2 Total duration of treatment of such persons in days ...	2 yrs	960	...	...	6 to 9 m'ths	1736	...	2 396
3 Aggregate number of attendances of such persons at out-patient clinic ...	306	100	...	...	960	287	1266	387
4 Number of such persons who were treated as in-patients ...	3	3	...	...	3	2	6	5
5 Aggregate number of "in-patient days" for such persons...	9 days	35	...	...	9 days	28	18 days	63
6 Number of such persons treated with Salvarsan substitutes ...	6	5	...	...	...	...	6	5
7 Number of doses given of such substitutes...	60	42	...	...	...	...	60	42

## ADDENDUM.

Number of persons who were under treatment at the out-patient Clinic but who ceased to attend before treatment was completed ...	44	18	...	...	142	40	186	58
--	----	----	-----	-----	-----	----	-----	----

\* The patient should not be discharged until, in the opinion of the Medical Officer, he has ceased to be infectious.

+ "Duration of treatment" means the period between the dates of the first and last attendances of the patient.

These figures are as near as can be ascertained.

TABLE 14.

**List of Registered Midwives practising in Leicester.  
(January, 1920).**

† ELIZA BLYTH ...	...	2,760 ...	13 Fairfield Street
A. A. HUNT ...	...	25,486 ...	166 Chainwood Street
MARY ALEXANDER ...	...	7,567 ...	32 Willow Bridge St.
PRISCILLA CHAMBERS ...	...	2,906 ...	31 Upper Charles St.
BEATRICE COLEMAN ...	...	36,726 ...	16 Westbourne St.
JEMIMA DAWKINS ...	...	36,754 ...	1 Pool Road
MARIA PILSWORTH ...	...	36,784 ...	52 St. Nicholas St.
ADELAIDE INGHAM ...	...	41,739 ...	238 Belgrave Gate
MARY ANN FREER ...	...	406 ...	52 Marjorie Street
GERTRUDE GARDNER ...	...	...	11 Prebend Street
FANNY GAWTHORNE ...	...	30,974 ...	45 Aylestone Road
MIRIAM HOWSAM ...	...	5,223 ...	90 Sylvan Street
LOUISA S. HICKS ...	...	37,583 ...	52 St. Nicholas St.
† MATILDA HILL ...	...	28,009 ...	37 Denmark Road
DOROTHY HILL ...	...	...	37 Denmark Road
† LIZZIE A. COF ...	...	23,568 ..	117 Wand Street
SARAH HARRATT ...	...	33,745 ...	69 Burfield Street
ADA HUTCHINS ...	...	33,774 ...	49 Melton Road
MARY J. LAPPAGE ...	...	7,772 ...	21 Duntun Street
ANNIE LAUGHTON ...	...	11,389 ...	236 Clarendon Pk. Rd.
† LUCY A. NOON ...	...	30,688 ..	1 Spence Street
† ELEANOR STANION ...	...	43,923 ..	44 Stuart Street
EDITH E. K. SIMISTER	...	28,446 ..	36 Wood Hill
EMMA WALKER ...	...	4,333 ...	11 Abbey Park Rd.
ADELAIDE WESTON ...	...	689 ..	3 Atkins Street
CHARLOTTE MARCH ...	...	1,639 ..	180 Grasmere Street
LILY E. REES ...	...	42,330 ...	207 Fosse Rd. North
† FRANCES A. POTTER ...	...	...	71 Barclay Street
J. McCULL ...	...	...	80 Norfolk Street
Total ...		29.	

\* Holds Certificate of Central Midwives' Board.

† Holds Certificate of London Obstetrical Society.

‡ Trained at Maternity Hospital, Causeway Lane

